

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 8:00 am**  
**Secretary of State**

03-27-2008 90026 005 \*\*\*\*61.25

**DOCUMENT # N00000003442**

1. Entity Name  
**TEAM FERNANDINA STINGRAYS, INC.**



Principal Place of Business  
**20 S. FIFTH ST.  
FERNANDINA BEACH, FL 32034**

Mailing Address  
**20 S. FIFTH ST.  
FERNANDINA BEACH, FL 32034**

**40032376**



**DO NOT WRITE IN THIS SPACE**

03052008 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**59-3726719**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**DAVIS, CLYDE W  
20 S. FIFTH ST.  
FERNANDINA BEACH, FL 32034**

**960185 Gateway  
Blvd.**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
CHRISTIAN, JR., ROBERT L  
124 S 5TH ST  
FERNANDINA BEACH, FL 32034**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
BELCHER, CHRIS  
1817 HIGHLAND DR  
FERNANDINA BEACH, FL 32034**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
CHRISTIAN, REBECCA W  
124 S. 5TH ST.  
FERNANDINA BEACH, FL 32034**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
LAWRENCE, KATHY  
1006 N. 15TH STREET  
FERNANDINA BEACH, FL 32034**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BORGMAN, MARY ANN  
4953 SPANISH OAKS CIRCLE  
FERNANDINA BEACH, FL 32034**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Rebecca W. Christian**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-20-08 (904)261-5386**  
Date Daytime Phone #