

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007670

FILED
Apr 25, 2007
Secretary of State

Entity Name: FERNANDINA PIRATES CLUB, INC.

Current Principal Place of Business:

P.O. BOX 1094
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

1 TEN ACRES
FERNANDINA BEACH, FL 32034

Current Mailing Address:

P.O. BOX 1094
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-3725070 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A. JEFFREY TOMASSETTI, ESQ.
406 ASH STREET
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHILDER, ERIC
Address: 845-B ELLEN ST
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD () Delete
Name: BLACK, CHERYL
Address: 2156 SAPELO CT
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD () Delete
Name: HAIR, WANDA
Address: 1664 SCOTT RD
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VD () Delete
Name: WELSH, JUDY
Address: 133 NORTH 4TH ST
City-St-Zip: SAINT MARYS, GA 31558

Title: D () Delete
Name: WRIGHT, JERRY
Address: 2016 RUSSELL ROAD
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: MACKIE, LAWRENCE
Address: 2182 OFFSHIRE DR
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: CUMBERLAND, MARIE
Address: 824 N 15TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VD (X) Change () Addition
Name: MATTHEWS, PAUL
Address: 125 N 5TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE CUMBERLAND

TD

04/25/2007

Electronic Signature of Signing Officer or Director

Date