2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

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Entity Name: ST. JOHNS GOLF & COUNTRY CLUB COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3732426 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: PRES
Name: WATT, PAM
Address: 11555 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: VP
Name: BAYERL, PATTI
Address: 11555 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: SEC
Name: KIRA, STEPAN
Address: 11555 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: T
Name: SHARPE, STEVE
Address: 11555 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

Title: DIR
Name: BARRETT, RICHARD
Address: 11555 CENTRAL PARKWAY
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

SIGNATURE: PAM WATT PRES 01/05/2011
Electronic Signature of Signing Officer or Director Date