

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008422

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: PORT ST. JOE COMMERCE CENTER ASSOCIATION, INC.

## Current Principal Place of Business:

245 RIVERSIDE AVENUE  
SUITE 500  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

## Current Mailing Address:

245 RIVERSIDE AVENUE  
SUITE 500, ATTN: LEGAL DEPT.  
JACKSONVILLE, FL 32202

## New Mailing Address:

245 RIVERSIDE AVENUE SUITE 500  
ATTN: LEGAL DEPT - SUSAN WHITLATCH  
JACKSONVILLE, FL 32202

FEI Number: 01-0750636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARX, CHRISTINE  
245 RIVERSIDE AVENUE  
SUITE 500  
JACKSONVILLE, FL 32202 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: DV ( ) Delete  
Name: SLAPPEY, BRADFORD A  
Address: 245 RIVERSIDE AVENUE SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: DP ( ) Delete  
Name: GISBERT, MARIO  
Address: 301 E. 1ST STREET  
City-St-Zip: PORT ST. JOE, FL 32756

Title: D ( ) Delete  
Name: KOHL, MARK  
Address: 100 BECKRICH ROAD, SUITE 200  
City-St-Zip: PANAMA CITY BEACH, FL 32407

Title: AS ( ) Delete  
Name: ELDER, SCOT M  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: S ( ) Delete  
Name: AYSCUE, BRANDON L  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: T ( ) Delete  
Name: ODOM, HEIDE  
Address: 245 RIVERSIDE AVE SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PANASENY, TOM  
Address: 301 EAST 1ST STREET  
City-St-Zip: PORT ST. JOE, FL 32457

Title: DV (X) Change ( ) Addition  
Name: FLECK, MATT  
Address: 301 E. 1ST STREET  
City-St-Zip: PORT ST. JOE, FL 32457

Title: DV (X) Change ( ) Addition  
Name: CALDWELL, DANE  
Address: 301 E. 1ST STREET  
City-St-Zip: PORT ST. JOE, FL 32457

Title: S (X) Change ( ) Addition  
Name: BRYAN, JOANNA E  
Address: 301 E. 1ST STREET  
City-St-Zip: PORT ST. JOE, FL 32457

Title: T (X) Change ( ) Addition  
Name: JONES, PHILIP B  
Address: 245 RIVERSIDE AVENUE SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

Title: AT (X) Change ( ) Addition  
Name: CHILDERS, DAVID F III  
Address: 245 RIVERSIDE AVE SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

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: JOANNA E. BRYAN

S

04/27/2007

Electronic Signature of Signing Officer or Director

Date