## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT  1998					Secretary of State DIVISION OF CORPORATIONS					Secretary of State			
[		MENT n Name	#	N02475	(4)					]			
	JACKS	ONVILLE	SKI C	LUB, INC.						I I SAULE AU SEULE LIEU SUN SERVICE AU SEULE SEU			
Pr	Principal Place of Business Mailing Address									- a andriger gir berind frêtir dietir Lebbir Gill Grêtir	11011 BIBIT BIBIT	81811 81811 1881	
P.O. BOX 875  JACKSONVILLE FL 32201  JACKSONVILLE FL 32201						N4				3. Date Incorporated or Qualified .	v	<u> </u>	
חע	ONOUNVILLE	: F£ 02201			JACKSONVILLE FL 322	UI				04/11/1984	· · · · · · · · · · · · · · · · · · ·		
										4. FEI Number 59-3308912	<del></del>	Applied For Not Applicable	
_	Principal P	lace of Busin	ness		2a. Mailing Address			5. Certificate of Status Desired		Additional			
21	Suite, Apt. #, etc.				Suite, Apt. #, etc.			6. Election Campaign Financing		Required			
22					27			Trust Fund Contribution		May Be to Fees			
23	City & State				City & State				7. Is this nonprofit corporation a homeown		on?		
	Žip		Cour		Zip	C	ountry	y		Yes  8. This corporation owes or has paid the corporation of the	□ No	otangible	
24		A Managa	25		29	30	<del></del>			Personal Property Tax due June 30.	☐ Yes {	□ No	
┝	N	y. Name	and Add	ress of Current R	egistered Agent		81	Name		10. Name and Address of New Registered	Agent	· · · · · · · · · · · · · · · · · · ·	
	SMITH.	RAYMOND								ene, Audrey			
5666 FLAGSSTAFF ROAD							82 Street Addres			ss (P.O. Box Number is Not Acceptable) O Goodby's Hideaway Dr.	N.		
	JACKSO	<b>NYILLE</b> FL	32207				83				<u></u>		
1							84	City	<u> </u>	ksonville FI	<b>85</b> Zip	Code	
11.	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes,								corpo	ksonv111e ration submits this statement for the purpose	32 of changing	217 its registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.												s registered	
SIC	NATURE _	Muc	hey	Sheono					<u> </u>	7-15- when reinstating) DATE	<i>98</i>		
12.		aignature types		me of registered agent an OFFICERS AND D		NOTE: Registe		ent signature	required	ADDITIONS/CHANGES TO OFFICERS AN		BS IN 12	
TITL	E	VPD			☐ DELETE		TITLE	·			Change	☐ Addition	
NAM	16	BALICKI		<b></b>		1.2	NAME						
	EET ADDRESS	JACKSO		ONT RD #2204				ADDRESS					
TITE	(-ST-ZIP	PD	MAILLE	<u></u>	X DELETE		CITY - S	ST-ZIP	, <del>,</del>		101 Ohanaa	Address	
NAM		DAVIS, I	HAL		Fig occur	1	title Name		PD	trick, Steve	X Change	Addition	
	EET ADDRESS			. Street				ADDRESS		196 Pine Breeze Road			
CITY	-ST-ZIP	JACKSO	NVILLE !	FL			CITY-!			cksonville, FL 32257			
TITL	E	1D			☐ DELETE	3.1	TITLE		VP		<b>Y</b> Change	Addition	
NAM		SMITH,				3.2	NAME						
	EET ADDRESS	5666 FL				3.3	STREET	ADDRESS					
CITY	-ST-ZIP	JACKSO SECD	MAILLE	r <u>L</u>	☐ DELETE		CITY-S	ST-ZIP			05	The second	
NAM		FOSTER	LISA				ritle Name				L Change	Addition	
	ET ADDRESS	PO BOX		١				ADDRESS					
	-ST-ZIP	PONTE					CITY-S						
TITL		VPD		W-14	DELETE		TITLE				Change	Addition	
NAM	Ε	PARKER				5.21	NAME					ĺ	
STRE	ET ADDRESS	140 SAN				5.3	STREET	ADDRESS					
	-ST-ZIP	NEPTUN	E BCH F	L	<b>171</b>		CITY-S	T-ZIP					
TITLE	B .	VPD BICHADI	10 0110	ANI	△ DELETE		TITLE		TD		K Change	Addition	
NAM	1	RICHARI		an Ra Blvd			IAME			eene, Audrey			
31HZ	ET ADDRESS	(OU FUI)	TIL YEU	IN DLYD		6.3 8	STREET	ADDRESS	445	50 Goodby's Hideaway Dr.	N.		

PUNIE VEURA BCH FL

1443U GOODDY'S Hideaway Dr. N.

1443U GOODDY'S HIGEAWAY DR.

115.00

0111, 261, 2221

**FILED** 

Jul 23 1998 8:00am