

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 04, 2008
Secretary of State**

DOCUMENT# N03000005086

Entity Name: THE EXCHANGE CLUB OF THE JACKSONVILLE BEACHES, INC.

Current Principal Place of Business:

427 THIRD ST. NORTH
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

427 THIRD ST. NORTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-2259742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HILLEGASS, WILLIAM G
427 THIRD ST. NORTH
JACKSONVILLE BEACH, FL 32250 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: D () Delete
Name: HOOK, CHANTAL
Address: 3500 SOUTH 3RD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: MONELL, DIANA
Address: 4106 CROWNWOOD DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: T () Delete
Name: MORISON, JACK
Address: 152 ABACO WAY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP () Delete
Name: REITER, DEE
Address: 1798 SELVA MARINA DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S () Delete
Name: SMITH, GLEN
Address: 110 GRENADA LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P () Delete
Name: BRYAN, CHRIS
Address: 4417 HUNTER HAVEN LANE E
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: WILLIAM G HILLEGASS

RA

07/04/2008

Electronic Signature of Signing Officer or Director

_____ Date