

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07359

FILED
Apr 25, 2011
Secretary of State

Entity Name: PIER HOUSE OF JACKSONVILLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

221 6TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

4396 SEABREEZE DR.
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 59-2350407 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SNELSON, FRANKLIN
4396 SEABREEZE DR.
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: VP
Name: WILCOXON, LESLIE
Address: 3506 SANCTUARY BOULEVARD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: ST
Name: FRANKLIN, SNELSON
Address: 4396 SEABREEZE DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P
Name: EARNEST, WADE
Address: 220 EMERALD DRIVE
City-St-Zip: CHRISTIANSBURG, VA 24073

Title: D
Name: VASSALO, JOHN
Address: 315 PORPOISE POINT DR
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D
Name: SPARKS, ROBERT
Address: 14750 BEACH BOULEVARD, APT 56
City-St-Zip: JACKSONVILLE, FL 32250

Title: D
Name: WILLIAMS, EDWARD M.D.
Address: 1971 DOCTORS MOORINGS CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068

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: FRANKLIN SNELSON

SEC

04/25/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date