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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N26882

(3)

THE RIVER CLUB OF JACKSONVILLE, INC.

•	of Business	Mailing Address			## ### ### #### #### #### #### ########
C/O MARK JOHNSON 35TH FL. INDEPENDENT SOUARE JACKSONVILLE FL 32202 US		C/O MARK JOHNSON 35TH FL. INDEPENDENT SOUARE JACKSONVILLE FL 32202 US			
				3. Date Incorporated or Qualified 06/09/1988	3a. Date of Last Report 04/20/1995
2. Principal Place	ce of Business	2a. Mailing Address 26		4. FEI Number 59-0754058	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation has liability for Florida Statutes	or intringible tax under s. 199.032, ☑ Yes □ No
24	25 9. Name and Address of Currer		30	10. Name and Address of New	
	9. Name and Address of Currer	it uedistelen väent	81 Name		
			JO	HN BERARDI	abla)
JOHNSON, MARK A.		82 Street Ad		odress (P.O. Box Number is Not Acceptable) 43 PRINCETON SQUARE BLVD. EAST #1515	
	, INDEPENDENT SQUARE		83	143 FIGHELION DECIME	
JACKSO	NVILLE FL 32202				7-17-0-4
			<b>84</b>   City   T.N	ACKSONVILLE	FL 85 Zip Code 32256
44 Discussion	the provisions of Sections 617.0500	2 and 617 1508. Florida Statutes	the share paging po	maration submits this statement for the s	ourpose of changing its registered office
or registers	ad agont or both in the State OLFIOTI	ida. Such chaoge was authorized	by the corporation's	board of directors. Thereby accept the ap	ppointment as registered agent. I am
familiar wit	h, and accept the obligations of, Seci	tion 617.0503, Florida Statutes.		4-2	26-96
	Colon Borard	لد			DAIL
SIGNATURE _	Cranks and broad or printed make of registered agen	can entre if applicable INQTE	Registered Agent signature re	guired when reinstating)	DATE
	Signiture typed or printed name of registered agen		Registered Agent signaturu re		FFICERS AND DIRECTORS IN 12
12.	Signiture typed or printed name of registered agen	n and tide if applicable (NOTE ID DIRECTORS DELETE		ADDITIONS/CHANGES TO O	FFICERS AND DIRECTORS IN 12  Change   Addition
12. TITLE	Significant typed or printed manie of registered agen OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO O	
12. TITLE NAME	Sgnfund bred or printed have of registered agen OFFICERS AN BAKER, JOHN D II	ID DIRECTORS	13. 1.1 TITLE	ADDITIONS CHANGES TO OF VICE-PRESIDENT EDWARD W. LANE, III	
12. TITLE NAME STREET ADDRESS	Significant typed or printed manie of registered agen OFFICERS AN	ID DIRECTORS	13. 1.1 TITLE 12 NAME	ADDITIONS CHANGES TO OF VICE-PRESIDENT EDWARD W. LANE, III 1735 BEACH AVENUE	□ Change □ X Addition
12. TITLE NAME	Signification forced or printed name of registered agent OFFICERS AN T BAKER, JOHN D II PO 4867 N/A (155E 21ST ST	ID DIRECTORS	13. 1.1 TITLE 12 NAME 13 STHEET ADDRESS	ADDITIONS CHANGES TO OF VICE-PRESIDENT EDWARD W. LANE, III 1735 BEACH AVENUE ATLANTIC BEACH, FL	□ Change □ X Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN T BAKER, JOHN D II PO 4667 N/A (155E 21ST ST JACKSONVILLE FL	ID DIRECTORS  DELETE	13. 1.1 TITLE 12 NAME 1.3 STHEET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS CHANGES TO OF VICE-PRESIDENT EDWARD W. LANE, III 1735 BEACH AVENUE ATLANTIC BEACH, FL. SECRETARY	☐ Change 【】 Addition
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SIGNATURE: Rundl Bollewton

4/24/96

904-358-8695

Daytme Phone #