

2000 UNIFORM BUSINESS REPORT (UBR)

PAGE

FILED

Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90037 025 ****61.25

DOCUMENT # N35242

1. Entity Name

EXXON ANNUITANTS CLUB OF NORTHEAST FLORIDA, INC.

Principal Place of Business

Mailing Address

4003 CATTAIL POND DR
JACKSONVILLE FL 32224
US

4003 CATTAIL POND DR
JACKSONVILLE FL 32224-7959
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2933127

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ERDLITZ, ROBERT
7925 MERRILL ROAD APT 2815
JACKSONVILLE FL 32277

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRALL, HORACE G 4003 CATTAIL POND DRIVE JACKSONVILLE FL 32224	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ERDLITZ, ROBERT 7925 MERRILL ROAD APT 2815 JACKSONVILLE FL 32277	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HANNA, ROBERT C JR 2629 LIGHTHOUSE COVE PLACE POINTE VEDRA BEACH FL 32082	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, ROBERT 137 WINDWARD CIRCLE ORMOND BEACH FL 32176	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BANGS, DONALD 10 FEDERAL LANE PALM COAST FL 32137	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GETSON, EUGENE M 1205 CUNNINGHAM CREEK DRIVE JACKSONVILLE FL 32259	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRALL, HORACE G 4003 CATTAIL POND DRIVE JACKSONVILLE, FL 32224	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRALL, DONA M 4003 CATTAIL POND DRIVE JACKSONVILLE, FL 32224	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVITT, KATHLEEN 4561 COQUINA CROSSING DRIVE ELKTON, FL 32033	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COOPER, WILLIAM 10321 N. HEATHER GLEN DRIVE JACKSONVILLE, FL 32256	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANGS, DONALD 10 FEDERAL LANE PALM COAST, FL 32137	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, MARIE 10321 N. HEATHER GLEN DRIVE JACKSONVILLE, FL 32256	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert A. Erditz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/00
Date

904-745-0152
Daytime Phone #

CR2E037 (9/99)

EXXON ANNUITANTS CLUB
OF NORTHEAST FLORIDA
4003 Cattail Pond Drive
Jacksonville, FL 32224

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EXXON ANNUITANTS CLUB OF N.E. FLORIDA, INC.

D	ADDITION
DUNCAN, JOHN	
2801 N. PENINSULA AVE #203	
NEW SMYRNA BEACH, FL 32169	
D	ADDITION
DESNOYERS, GASTON	
7 CAPRI COURT	
PALM COAST, FL 32137	

SIGNATURE:

PRINT NAME

DATE DAYTIME PHONE