

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39153

FILED
Apr 22, 2006
Secretary of State

Entity Name: SEA RAY CLUB OF JACKSONVILLE, INC.

Current Principal Place of Business:

2825 HOLLYBAY ROAD
ORANGE PARK, FL 32073 US

New Principal Place of Business:

2549 WHISPERING PINES DR
ORANGE PARK, FL 32003 US

Current Mailing Address:

2549 WHISPERING PINE DR
ORANGE PARK, FL 32003 US

New Mailing Address:

FEI Number: 59-3125281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVERS, JOHN
3165- 18 FIRST AVE
FERNANDINA BEACH, FL 32034 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: VC () Delete
Name: STEPHENSON, LARRY
Address: 3833 FOREST DR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: RC () Delete
Name: SMITH, MARIANNE
Address: 2549 WHISPERING PINES DR.
City-St-Zip: ORANGE PARK, FL 32003

Title: S () Delete
Name: LEVERS, JUDY
Address: 3165 FIRST AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S () Delete
Name: BAYLER, EDNA
Address: 388 ARTHUR MOORE DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: T () Delete
Name: SMITH, RAY
Address: 2549 WHISPERING PINES DR.
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: COOK, LINDA
Address: 2835 HOLLYBAY RD.
City-St-Zip: ORANGE PARK, FL 32073

Title: RC (X) Change () Addition
Name: MCFARLAND, DENISE
Address: 2257 LAKESHORE DR. N.
City-St-Zip: ORANGE PARK, FL 32003

Title: RS (X) Change () Addition
Name: BAYLER, EDNA
Address: 338 ARTHUR MOORE DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: CS (X) Change () Addition
Name: SMITH, MARIANNE
Address: 2549 WHISPERING PINES DR.
City-St-Zip: ORANGE PARK, FL 32003

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RAY SMITH

TREA

04/22/2006

Electronic Signature of Signing Officer or Director

Date