

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39153

FILED
Apr 30, 2008
Secretary of State

Entity Name: SEA RAY CLUB OF JACKSONVILLE, INC.

Current Principal Place of Business:

2549 WHISPERING PINES DR
ORANGE PARK, FL 32003 US

New Principal Place of Business:

Current Mailing Address:

2549 WHISPERING PINES DR
ORANGE PARK, FL 32003 US

New Mailing Address:

2549 WHISPERING PINES DR
ORANGE PARK, FL 32003 US

FEI Number: 59-3125281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOPER, PETE G COMM'R
1827 COLONIAL DR.
GREEN COVE SPRINGS, FL 32043 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: GUTE, DON
Address: 4361 TRADEWINDS DRIVE
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: RC () Delete
Name: MCFARLAND, BILL
Address: 2257 LAKESHORE DR. N.
City-St-Zip: ORANGE PARK, FL 32003

Title: CS () Delete
Name: PERRY, ROZELLE
Address: P.O. BOX 1531
City-St-Zip: ORANGE PARK, FL 32067 US

Title: RS () Delete
Name: OWEN, CONNIE
Address: 2172 SALT MYRTLE LANE
City-St-Zip: ORANGE PARK, FL 32003 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: RC (X) Change () Addition
Name: PERRY, ALAN
Address: 1723 POPLAR DRIVE
City-St-Zip: ORANGE PARK, FL 32073 US

Title: CS (X) Change () Addition
Name: PERRY, ROZELLE
Address: 1723 POPLAR DRIVE
City-St-Zip: ORANGE PARK, FL 32073 US

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

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

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: RAY SMITH

TRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date