

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41188

FILED
Mar 21, 2012
Secretary of State

Entity Name: ANASTASIA ISLAND RESORT, INC.

Current Principal Place of Business:

4825 A1A SOUTH
ST AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

4825 A1A SOUTH
BOX 200
ST AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-3044098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINLEY, NANCY
4825 A1A SOUTH
BOX 200
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

LAMPARD, VIVIAN
4825 A1A SOUTH
BOX 200
SAINT AUGUSTINE, FL 32080 US

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: VIVIAN LAMPARD

03/21/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LAMPARD, VIVIAN
Address: 4825 A1A SOUTH
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP
Name: LASHER, WANDA
Address: 4825 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T
Name: WILLS, PETER
Address: 4825 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S
Name: WYTIAZ, JOE
Address: 4825 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: MGRM
Name: KETY, LARRY
Address: 4825 A1A SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: VIVIAN LAMPARD

P

03/21/2012

Electronic Signature of Signing Officer or Director

Date