FILE NOW: FILING FEE AFTER MAY 1 IS $150.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -9 AM 8:18

DOCUMENT # **N93000002647 (6)**

1. Corporation Name

SEVEN PINES ISLAND MARINA ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% C. ATKERSON, INC. 9471 BAYMEADOWS RD., STE. 403 JACKSONVILLE FL 32256 US	% C. ATKERSON, INC. 9471 BAYMEADOWS RD., STE. 403 JACKSONVILLE FL 32256 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/14/1993
3a. Date of Last Report: 07/15/1994
4. FEI Number: 59-3218148 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 % C. Spurling	26 % C. Spurling
Suite, Apt. #, etc 22 2318 Pine Island Court	Suite, Apt. #, etc 27 2318 Pine Island Court
City & State 23 Jacksonville, Florida	City & State 28 Jacksonville, Florida
Zip / Country 24 32224 / 25 Duval	Zip / Country 29 32224 / 30 Duval

9. Name and Address of Current Registered Agent

SMITH HULSEY & BUSEY
225 WATER ST
SUITE 1800
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name: Harry Hall
82 Street Address (P.O. Box Number is Not Acceptable): 2306 Pine Island Court
83: Jacksonville, Florida
84 City: FL 85 Zip Code: 32224

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Harry T. Hall — 3/10/95
Signature (typed or printed) name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PDST	11 TITLE	PD	XX Change ☐ Addition
NAME	LATOUR, THEODORE A.	12 NAME	OLSON, ROBERT	
STREET ADDRESS	214 N. HOGAN ST.	13 STREET ADDRESS	2327 PINE ISLAND CT. JAX,FL 32224	
CITY ST ZIP	JACKSONVILLE FL	14 CITY ST ZIP		
TITLE	D	21 TITLE	VD	XX Change ☐ Addition
NAME	ATKERSON, CHARLES F. J	22 NAME	QUINONES, JOE	
STREET ADDRESS	9471 BAYMEADOWS RD., STE. 403	23 STREET ADDRESS	2402 PINE ISLAND COURT	
CITY ST ZIP	JACKSONVILLE FL	24 CITY ST ZIP	JAX, FL 32224	
TITLE	D	31 TITLE	DST	XX Change ☐ Addition
NAME	ROBBINS, DAVID K.	32 NAME	SPURLING, CATHERINE	
STREET ADDRESS	9471 BAYMEADOWS RD., STE. 403	33 STREET ADDRESS	2318 PINE ISLAND CT.	
CITY ST ZIP	JACKSONVILLE FL	34 CITY ST ZIP	JAX, FL 32224	
TITLE	D	41 TITLE		XX Change ☐ Addition
NAME	HARDY, CARL E.	42 NAME		
STREET ADDRESS	2366 PINE ISLAND CT.	43 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL	44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Catherine L. Spurling — 3/10/95 — 904-223-6732
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING ON BEHALF OF CORPORATION — DATE — Daytime Phone #

0001730