

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2008 08:00 AM
Secretary of State

DOCUMENT # N94000000661 1. Entity Name ORMOND OCEAN CLUB NORTH, INC.					
Principal Place of Business 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176 US			Mailing Address 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
State, Apt. #, etc.		State, Apt. #, etc.			
City & State		City & State		4. FEI Number 58-1410438	
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		
DURGIN, J PAUL 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>J. PAUL DURGIN</u> <u>J. Paul Durgin</u> <u>1-28-08</u> Signature, typed or printed name of registered agent and date (NOTE: Registered Agent signature is not used when registering) DATE					
FILE NOW FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to: Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P WALDEN, WILLIAM 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D FAMBRO, PAUL 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition U00000849770 03/21/08-80034-001 61.25	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T AVERETT, JAMES 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D VEAL, LEON 855 OCEANSHORE BLVD ORMOND BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D VARBOROUGH, ROBERT 855 OCEAN SHORE BLVD ORMOND BEACH FL 32176	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP REX, LARRY 855 OCEAN SHORES BLVD ORMOND BEACH FL 32176	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <u>William A. Walden</u> <u>1-28-2008</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE CERTIFY FILING #					