

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90181 007 ****70.00

DOCUMENT # N95000001088

1. Corporation Name

AMELIA ISLAND CLUB, INC.

Principal Place of Business

6800 FIRST COAST HWY
AMELIA ISLAND FL 32034
US

Mailing Address

P O BOX 3000
AMELIA ISLAND FL 32035
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
03/06/1995

4. FEI Number
59-3385039

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

9. Name and Address of Current Registered Agent

CUTAJAR, JOSEPH
6800 FIRST COAST HWY
AMELIA ISLAND FL 32034

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LATIMER, HUGH A
STREET ADDRESS 30 MARSH CREEK ROAD
CITY-ST-ZIP AMELIA ISLAND FL 32034

TITLE D
NAME ORR, JOHN
STREET ADDRESS 51 SEA MARSH ROAD
CITY-ST-ZIP AMELIA ISLAND FL 32034

TITLE D
NAME CARMODY, THOMAS
STREET ADDRESS 1855 BEACHWALKER RD
CITY-ST-ZIP AMELIA ISLAND FL 32034

TITLE D
NAME O'DAY, JOHN
STREET ADDRESS 36 BEACHWALKER RD
CITY-ST-ZIP AMELIA ISLAND FL 32034

TITLE P
NAME BIERMAN, DANIEL
STREET ADDRESS 21 PAINTED BUNTING
CITY-ST-ZIP AMELIA ISLAND FL 32034

TITLE D
NAME STAFFORD, ROY
STREET ADDRESS 16 RED CEDAR
CITY-ST-ZIP AMELIA ISLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME O'Day, John
1.3 STREET ADDRESS 36 Beachwalker Road
1.4 CITY-ST-ZIP Amelia Island, FL 32034 ☒ Change ☐ Addition

2.1 TITLE V
2.2 NAME Gordon, Charles
2.3 STREET ADDRESS 78 Marsh Creek
2.4 CITY-ST-ZIP Amelia Island, FL 32034 ☐ Change ☒ Addition

3.1 TITLE S
3.2 NAME Carmody, Thomas
3.3 STREET ADDRESS 1855 Beachwalker Road
3.4 CITY-ST-ZIP Amelia Island, FL 32034 ☒ Change ☐ Addition

4.1 TITLE D
4.2 NAME Eierman, Daniel
4.3 STREET ADDRESS 21 Painted Bunting
4.4 CITY-ST-ZIP Amelia Island FL 32034 ☒ Change ☐ Addition

5.1 TITLE D
5.2 NAME Stanger, Rhys L
5.3 STREET ADDRESS 79 Marsh Creek Road
5.4 CITY-ST-ZIP Amelia Island FL 32034 ☐ Change ☒ Addition

6.1 TITLE D
6.2 NAME Schoonover, Kevin G
6.3 STREET ADDRESS 2037 Beach Wood Villas
6.4 CITY-ST-ZIP Amelia Island FL 32034 ☐ Change ☒ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)