

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000004798

FILED
Oct 07, 2005
Secretary of State

Entity Name: FIRST TEE OF ST. JOHNS COUNTY, INC.

Current Principal Place of Business:

4401 CYPRESS LINKS BLVD
ELKTON, FL 32033

New Principal Place of Business:

Current Mailing Address:

4401 CYPRESS LINKS BLVD
ELKTON, FL 32033

New Mailing Address:

FEI Number: 59-3595774 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOLES, JOSEPH L JR.
120 CHARLOTTE STREET
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

HELMS, JEFF
400 NORTH PONCE DE LEON BLVD
ST. AUGUSTINE, FL 32084 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: JEFFREY W. HELMS

10/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BC () Delete
Name: SMITH, CHRIS
Address: 3403 LANDS END DR
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: P () Delete
Name: PEARCE, JOE
Address: 212 NORTHWIND CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S () Delete
Name: JACKSON, THOMAS
Address: 917 CHIPPEWA STREET
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: ED () Delete
Name: BURNEY, ED
Address: 9661 BAYOU BLUFF DR
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BC (X) Change () Addition
Name: GLOD, DAN
Address: 663 HANNAH PARK LANE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: P (X) Change () Addition
Name: PEARCE, JOE
Address: 113 LAGOON FORREST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

Title: ED (X) Change () Addition
Name: LAVERCOMBE, ELLIOTT
Address: 997 BECKINGHAM DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELLIOTT LAVERCOMBE

ED

10/07/2005

Electronic Signature of Signing Officer or Director

Date