

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000004798

**FILED**  
**Jan 07, 2010**  
**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 ( )**

**Name and Address of Current Registered Agent:**

HELMS, JEFF  
400 NORTH PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** TREFRY, CHIP  
**Address:** 7645 GATE PARKWAY SUITE 101  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** T  
**Name:** PIERSOL, TODD  
**Address:** 7341 OFFICE PARK PLACE, SUITE 202A  
**City-St-Zip:** MELBOURNE, FL 32940

**Title:** S  
**Name:** TUCKER, H. WESLEY  
**Address:** 4900 CYPRESS LINKS BLVD.  
**City-St-Zip:** ELKTON, FL 32033

**Title:** ED  
**Name:** LAWRENCE, THOMAS J  
**Address:** 4401 CYPRESS LINKS BLVD.  
**City-St-Zip:** ELKTON, FL 32033

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:** THOMAS J. LAWRENCE

MR.

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date