

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90041 025 ***150.00

DOCUMENT # P95000054568

1. Entity Name

JACKSONVILLE BEACH PROPERTIES, INC.



Principal Place of Business

320 N 1ST STREET
STE 912
PONTE VEDRA BEACH FL 32082

Mailing Address

320 N 1ST STREET
JACKSONVILLE BEACH FL 32250



2. Principal Place of Business - No P.O. Box #

320 N 1st ST
Suite, Apt. #, etc.
912

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

JACKSONVILLE BEACH

City & State

FL

4. FEI Number

59-3332333

Applied For

Not Applicable

Zip

32250

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FISHER, TOUSEY, LEAS & BALL, P.A.
818 N. A1A
SUITE 104
PONTE VEDRA BEACH FL 32082

7. Name and Address of New Registered Agent

Name **HARRY ALEXON**

Street Address (P.O. Box Number is Not Acceptable)
320 N 1st ST. #912

City **JACKSONVILLE BEACH, FL** Zip Code **32250**

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

Signature, typed or printed name of registered agent and fee. (If applicable)

(NOTE: Registered Agent signature required when terminating)

DATE

FILE NOW!!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ALEXON, HARRY ☐ Delete
STREET ADDRESS 207 NORTH ROSCOE BLVD.
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE SV
NAME ALEXON, JOHN ☐ Delete
STREET ADDRESS 21 SCLATTERBRIDGE
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME HARRY ALEXON
STREET ADDRESS 320 N. 1st ST. #912
CITY-ST-ZIP JAX BEACH, FL 32250

TITLE SV ☒ Change ☐ Addition
NAME ALEXON, JOHN
STREET ADDRESS 51 S ROSCOE
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-08

904.372-4051

Date

Daytime Phone #