

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2008 8:00 am
Secretary of State

03-18-2008 90015 003 ***150.00

DOCUMENT # P96000023246

1. Entity Name
PORT ROYAL PHASE II, INC.



Principal Place of Business
**17 WEST CEDAR ST
SUITE 3
PENSACOLA, FL 32502 US**

Mailing Address
**POST OFFICE BOX 12725
PENSACOLA, FL 32591 US**

40048024



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02192008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-3381240

Applied For

Not Applicable

Zip

Country

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

**CARR, JOHN S
17 WEST CEDAR ST
SUITE 3
PENSACOLA, FL 32502**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
CARR, JOHN S
17 WEST CEDAR ST SUITE 3
PENSACOLA, FL 32502** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DST
NICKELSEN, E J
17 WEST CEDAR STREET SUITE 3
PENSACOLA, FL 32502** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
CHADBOURNE, JR., EDWARD M
17 WEST CEDAR STREET, SUITE 3
PENSACOLA, FL 32502** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DVP
JESMONTH, R
200 SOUTH TARRAGONA STREET
PENSACOLA, FL 32502** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DVP
Jesmonth, Richard
323 East Romana Street
Pensacola, FL 32502** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GOLDSTEIN, GERALD
1346 QUIET COVE CT
GULF BREEZE, FL 32563** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SWAINE, RONALD E
120 EAST MAIN STREET
PENSACOLA, FL 32502** ☐ 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 Chapter 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.

**John S. Carr
President**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/08 (850) 434-2244

Date Daytime Phone #