

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036622

FILED
Apr 24, 2008
Secretary of State

Entity Name: CRUISE CENTERS OF JACKSONVILLE, INC.

Current Principal Place of Business:

11362-16 SAN JOSE BLVD.
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11362-16 SAN JOSE BLVD.
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-3570720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWARTZ, PHILIP
379 CASTLETON CIRCLE
TALLAHASSEE, FL 32312 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWARTZ, PHILIP D
Address: 379 CARTETON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: HARRIS, KATHERINE M
Address: 8611 LAKE MARIE HA DR S
City-St-Zip: JACKSONVILLE, FL 32220

Title: VP () Delete
Name: HORNING, SUZANNE
Address: 11282 E LAKE MANDARIN C
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: HOENING-FISHER, SUZANNE
Address: 11282 E LAKE MANDARIN C
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE M HARRIS

VP

04/24/2008

Electronic Signature of Signing Officer or Director

Date