


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000090408</b> 1. Entity Name <b>MOUNTAINEER LEISURE CORPORATION</b>	
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Principal Place of Business <b>2955 HARTLEY RD, SUITE 108 JACKSONVILLE, FL 32257</b>	Mailing Address <b>2955 HARTLEY RD, SUITE 108 JACKSONVILLE, FL 32257</b>
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DO NOT WRITE IN THIS SPACE



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3604686</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

MATOVINA, GREGORY E  
 2955 HARTLEY RD, SUITE 108  
 JACKSONVILLE, FL 32257

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

U00000786850  
01/17/08-80060-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MATOVINA, GREGORY E
STREET ADDRESS	2955 HARTLEY RD, SUITE 108
CITY- ST- ZIP	JACKSONVILLE, FL 32257
TITLE	D
NAME	BROSTEIN, DONALD K
STREET ADDRESS	4296 RIPKIN CIR E
CITY- ST- ZIP	JACKSONVILLE, FL
TITLE	D
NAME	CASSIS, MICHAEL A
STREET ADDRESS	2955 HARTLEY RD, STE 108
CITY- ST- ZIP	JACKSONVILLE, FL 32257
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE

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.

SIGNATURE: Michael A. Cassis Michael A. Cassis 1-14-08 904-612-0328  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #