

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84036

FILED
Mar 29, 2008
Secretary of State

Entity Name: PONCE LANDING OF ST. AUGUSTINE BEACH RENTAL COMPANY, INC.

Current Principal Place of Business:

826 A1A BCH., BLVD. #41
ST AUGUSTINE BEACH, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

826 A1A BCH. BLVD #41
ST. AUGUSTINE BEACH, FL 32080 US

New Mailing Address:

FEI Number: 59-3085210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, KATHERINE G
780 N. PONCE DE LEON BLVD.
ST. AUGUSTINE, FL 320853007 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: D () Delete
Name: LEWIS, EDMUND
Address: 826 A1A BEACH BLVD #13
City-St-Zip: ST AUGUSTINE, FL 32080

Title: BD () Delete
Name: MITCHELL, MICHAEL
Address: 826 A1A BEACH BLVD. #41
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: TD () Delete
Name: TIERNEY, TIM
Address: 969 RIVERWATCH DRIVE
City-St-Zip: VILLA HILLS, KY 41017

Title: PD () Delete
Name: BOECHLER, GERALD
Address: 826 AIA BEACH BLVD, #43
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VPD () Delete
Name: SAMPLE, FRANK
Address: 321 CHATTOLANEE HILL ROAD
City-St-Zip: OWINGS MILLS, MD 21117

Title: SD () Delete
Name: RIKER, PHIL
Address: 13 SEACHORSE COURT
City-St-Zip: ISLE OF PALM, SC 29464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: LEWIS, EDMUND
Address: 826 A1A BEACH BLVD #13
City-St-Zip: ST AUGUSTINE, FL 32080

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

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

Title: D (X) Change () Addition
Name: BOECHLER, GERALD
Address: 826 AIA BEACH BLVD, #43
City-St-Zip: ST AUGUSTINE, FL 32080

Title: PD (X) Change () Addition
Name: SAMPLE, FRANK
Address: 321 CHATTOLANEE HILL ROAD
City-St-Zip: OWINGS MILLS, MD 21117

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

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: MICHAEL MITCHELL

BD

03/29/2008

Electronic Signature of Signing Officer or Director

Date