

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707083

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC1112255744**

**Entity Name:** JACKSONVILLE SHELL CLUB, INC.

**Current Principal Place of Business:**

1010 N. 24TH STREET  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

1010 N. 24TH STREET  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number: 59-1785008**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

THORPE, CHARLOTTE M  
1010 N. 24TH ST.  
JACKSONVILLE BEACH, FL 32250 US

*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

**Officer/Director Detail :**

Title            D  
Name            LEE, HARRY G  
Address        4132 ORTEGA BLVD.  
City-State-Zip: JACKSONVILLE FL 32207

Title            T  
Name            THORPE, CHARLOTTE M  
Address        1010 N. 24TH ST.  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title            PRESIDENT  
Name            MARSHALL, BRIAN  
Address        10515 INDIAN WALK ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title            S  
Name            ROWLEY, LAURA  
Address        3676 CASCADE RD.  
City-State-Zip: JACKSONVILLE FL 32207

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: CHARLOTTE M THORPE**

**TREASURER**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date