

FILE NOW: FILING FEE AFTER MAY-1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # 713116 (2)

1. Corporation Name

SPORTSMAN'S YACHT AND SAILING CLUBS, INC.

95 APR 10 PM 1:55

Principal Place of Business

Mailing Address

**1401 SE 47TH ST
CAPE CORAL FL 33904**

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CAPE CORAL FL 33904**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1967

3a. Date of Last Report

03/16/1994

4. FEI Number

59-1461487

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐ **\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**IRMA CHESTNUT
1434 S.E. 17TH STREET
CAPE CORAL FL 33990**

81 Name

GLADYS VETTER

82 Street Address (P.O. Box Number is Not Acceptable)

4939 PELICAN BLVD.

83

CAPE CORAL, FL. 33904

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Gladys V. Vetter

4/3/95

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

CHESTNUT, IRMA

STREET ADDRESS

1434 S.E. 17TH STREET

CITY- ST- ZIP

CAPE CORAL, FL 00000

1.1 TITLE

P

COMMODORE

☒ Change ☐ Addition

1.2 NAME

EDWARD T. STENGER

1.3 STREET ADDRESS

4020 CORONADO PKWY. #206

1.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

TITLE

VP

NAME

STENGER, ED

STREET ADDRESS

4020 CORONADO PKWY, APT 206

CITY- ST- ZIP

CAPE CORAL, FL 00000

2.1 TITLE

VP

VISE COMMADORE

☒ Change ☐ Addition

2.2 NAME

EDWARD KRUMREIG

2.3 STREET ADDRESS

4418 S.E. 12th AVE

2.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

TITLE

P

NAME

PAPA, JOSEPH

STREET ADDRESS

822 MONTICELLO CT.

CITY- ST- ZIP

CAPE CORAL, FL 00000

3.1 TITLE

D

REAR COMMADORE

☒ Change ☐ Addition

3.2 NAME

O.B. CHESTNUT

3.3 STREET ADDRESS

1434 S.E. 17th ST.

3.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

TITLE

D

NAME

KRUMREIG, EDWARD

STREET ADDRESS

4418 SE 12TH AVE

CITY- ST- ZIP

CAPE CORAL, FL 00000

4.1 TITLE

T

TREASURER

☒ Change ☐ Addition

4.2 NAME

GLADYS VETTER

4.3 STREET ADDRESS

4939 PELICAN BLVD

4.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

TITLE

SD

NAME

VETTER, GLADYS

STREET ADDRESS

4939 PELICAN BLVD

CITY- ST- ZIP

CAPE CORAL, FL 00000

5.1 TITLE

SD

SECRETARY

☒ Change ☐ Addition

5.2 NAME

DORIS E. STENGER

5.3 STREET ADDRESS

4020 CORONADO PKWY #206

5.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

TITLE

TD

NAME

PELLOCK, SANDRA

STREET ADDRESS

3926 S.E. 2ND AVENUE

CITY- ST- ZIP

CAPE CORAL FL

6.1 TITLE

D

DIRECTOR

☐ Change ☐ Addition

6.2 NAME

JOSEPH PAPA

6.3 STREET ADDRESS

822 MONTICELLO CT.

6.4 CITY- ST- ZIP

CAPE CORAL, FL. 33904

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gladys V. Vetter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-95

813-549-5923