

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 719488 (9)

1. Corporation Name

APALACHEE BAY YACHT CLUB, INC.



Principal Place of Business

Mailing Address

**MARSH HARBOR, SHELL POINT
P. O. BOX 5673
TALLAHASSEE FL 32314**

**MARSH HARBOR, SHELL POINT
P. O. BOX 5673
TALLAHASSEE FL 32314**

3. Date Incorporated or Qualified
10/09/1970

3a. Date of Last Report
03/22/1995

2. Principal Place of Business

2a. Mailing Address

21 **69 HARBOUR POINT DR**

26

4. FEI Number
59-2441392

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23 **CRAWFORDVILLE FL**

28

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24 **32314**

25 **FLORIDA**

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BETH HAMILTON
2308 ARENDELL WAY
TALLAHASSEE FL 32308**

81 Name **DON REEDER**

82 Street Address (P.O. Box Number Is Not Acceptable)
2005 DYREHAVEN DR

83

84 City **TALLAHASSEE**

FL

85 Zip Code
32311

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Donald E. Reeder, Jr. **DONALD E. REEDER, JR.**

4/24/96

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE

NAME **HAMILTON, BETH**
STREET ADDRESS **2308 ARENDELL WAY**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **TO** ☐ DELETE

NAME **LUGER, KAY**
STREET ADDRESS **2979 HUNTINGTON DR**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **D** ☒ DELETE

NAME **MIKE REDIG**
STREET ADDRESS **2809 GLOVER ROAD**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **PD** ☒ DELETE

NAME **PERRINGER, JOHN**
STREET ADDRESS **4624 RAMSGATE DRIVE**
CITY-ST-ZIP **TALLAHASSEE FL**

TITLE **SD** ☒ DELETE

NAME **TILLMAN, BARBARA**
STREET ADDRESS **RT 3 BOX 9F**
CITY-ST-ZIP **MONTICELLO FL 32344**

TITLE **VD** ☒ DELETE

NAME **GETMAN, ANN**
STREET ADDRESS **1807 ATAPHA NENE**
CITY-ST-ZIP **TALLAHASSEE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition

1.2 NAME **DON REEDER**
1.3 STREET ADDRESS **2005 DYREHAVEN DR**
1.4 CITY-ST-ZIP **TALLAHASSEE, FL 32311**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME **SAME**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **JOHN WRIGHT**
3.3 STREET ADDRESS **6194 VERDURA WAY**
3.4 CITY-ST-ZIP **TALLAHASSEE, FL 32311**

4.1 TITLE **PD** ☒ Change ☐ Addition

4.2 NAME **MIKE REDIG**
4.3 STREET ADDRESS **2609 GLOVER ROAD**
4.4 CITY-ST-ZIP **TALLAHASSEE, FL 32310**

5.1 TITLE **SD** ☒ Change ☐ Addition

5.2 NAME **SUE ROSS**
5.3 STREET ADDRESS **43 HARBOR POINT DR**
5.4 CITY-ST-ZIP **CRAWFORDVILLE, FL 32327**

6.1 TITLE **VD** ☒ Change ☐ Addition

6.2 NAME **HAMILTON, BETH**
6.3 STREET ADDRESS **2308 ARENDELL WAY**
6.4 CITY-ST-ZIP **TALLAHASSEE, FL 32308**

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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald E. Reeder, Jr. **DONALD E. REEDER, JR.** **4/24/96** **487-4412**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)