

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719488

FILED
Jan 19, 2012
Secretary of State

Entity Name: APALACHEE BAY YACHT CLUB, INC.

Current Principal Place of Business:

69 HARBOUR POINT DRIVE
CRAWFORDVILLE, FL 32327 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1830
CRAWFORDVILLE, FL 32326

New Mailing Address:

FEI Number: 59-2441392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLENN, MAXINE B
28 SANDPIPER LANE
CRAWFORDVILLE, FL 32327 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

OFFICERS AND DIRECTORS:

Title: D
Name: TWEEDIE, LORNA
Address: 71 TWEEDIE'S PLACE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: PD
Name: GROVES, IVOR
Address: 17 ROYSTER DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: SD
Name: ROBINSON, MARTHA
Address: 7717 BRIARCREEK ROAD N
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD
Name: ROBINSON, SCOT
Address: 7717 BRIARCREEK ROAD N
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: DEPEW, C. HENRY
Address: 3316 LAKE SHORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: LIPSIUS, MARC
Address: 1623 SHELL POINT ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

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: MAXINE GLENN

MS

01/19/2012

Electronic Signature of Signing Officer or Director

Date