

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -4 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **722481** (9)

1. Corporation Name
THE YACHT & COUNTRY CLUB, INC.

Principal Place of Business Mailing Address
3883 S.E. FAIRWAY EAST STUART FL 34997 **3883 S.E. FAIRWAY STUART FL 34997**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/20/1972** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-1426270** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22 City & State 27 City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23 Zip Country 28 Zip Country

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

24 Zip Country 29 Zip Country 30 Zip Country

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

**KAPLAN, MICHAEL L
3883 SE FAIRWAY E
STUART, FL
34997**

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
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

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD**
NAME **PATTERSON, ROBERT A**
STREET ADDRESS **3474 SE FAIRWAY EAST**
CITY-ST-ZIP **STUART FL**

TITLE **VD**
NAME **FISHER, BEN J**
STREET ADDRESS **3244 SE FAIRWAY EAST**
CITY-ST-ZIP **STUART FL**

TITLE **PD**
NAME **KING, WILLIAM, H**
STREET ADDRESS **3533 SE FAIRWAY EAST**
CITY-ST-ZIP **STUART FL**

TITLE **TD**
NAME **HALEY, JOHN A**
STREET ADDRESS **3581 SE FAIRWAY W**
CITY-ST-ZIP **STUART FL**

TITLE **LEG**
NAME **GODSHALK, ERNEST**
STREET ADDRESS **4388 WHITCAR WAY**
CITY-ST-ZIP **STUART FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE **Secretary/Director** Change Addition
1.2 NAME **Donald A. Deeter**
1.3 STREET ADDRESS **3373 SE Fairway East**
1.4 CITY-ST-ZIP **Stuart, FL 34997**

2.1 TITLE **V. President/Director** Change Addition
2.2 NAME **Robert A. Patterson**
2.3 STREET ADDRESS **3474 SE Fairway East**
2.4 CITY-ST-ZIP **Stuart, FL 34997**

3.1 TITLE **President/Director** Change Addition
3.2 NAME **Ben Fisher, Jr.**
3.3 STREET ADDRESS **3244 SE Fairway East**
3.4 CITY-ST-ZIP **Stuart, FL 34997**

4.1 TITLE **Treasurer/Director** Change Addition
4.2 NAME **no change**
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **Legal Advisor-no change** Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE: *Ben J. Fisher*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ben J. Fisher

3-30-95 **407-287-3738**
Date Daytime Phone