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Apr 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 722481 (9)

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



Principal Place of Business: 3883 S.E. FAIRWAY EAST STUART FL 34997
Mailing Address: 3883 S.E. FAIRWAY EAST STUART FL 34997-6119

3. Date Incorporated or Qualified: 01/20/1972
3a. Date of Last Report: 04/23/1996

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
21-22: Suite, Apt. #, etc.
23: City & State
24: Zip, Country

4. FEI Number: 59-1426270
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
KAPLAN, MICHAEL L
3883 SE FAIRWAY E
STUART FL 34997

10. Name and Address of New Registered Agent
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 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PATTERSON, ROBERT A	
STREET ADDRESS	3474 SE FAIRWAY EAST	
CITY-ST-ZIP	STUART FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	CLEAVER, HAL	
STREET ADDRESS	3374 SE FAIRWAY EAST	
CITY-ST-ZIP	STUART FL 34997	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	HOGAN, JAMES	
STREET ADDRESS	2931 SE FAIRWAY WEST	
CITY-ST-ZIP	STUART FL 34997	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HALEY, JOHN A	
STREET ADDRESS	3581 SE FAIRWAY W	
CITY-ST-ZIP	STUART FL	
TITLE	LEG	<input type="checkbox"/> DELETE
NAME	GODSHALK, ERNEST	
STREET ADDRESS	4369 WHITCAR WAY	
CITY-ST-ZIP	STUART FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	VPD/TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Mr. Philip Ostendorf	
4.3 STREET ADDRESS	3331SE Fairway West	
4.4 CITY-ST-ZIP	Stuart, FL 34997	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ DATE: April 16, 1997 561-287-3736

CR2E037 (9/96)