

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 735204

1. Corporation Name

THE ISLAND ESTATES YACHT CLUB, INC.

450464 - 90242 - 27

Principal Place of Business

C/O PATRICIA OSTROSKY
311 PALM IS. SE
CLEARWATER FL 33767
US

Mailing Address

C/O PATRICIA OSTROSKY
311 PALM IS. SE
CLEARWATER FL 33767
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		03/10/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-2418802	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip			
24		29		30	

9. Name and Address of Current Registered Agent

WATSON, ED
736 ISLAND WAY #408
CLEARWATER FL 34630

10. Name and Address of New Registered Agent

81 Name **R.F. BECKHAM**
82 Street Address (P.O. Box Number is Not Acceptable) **321 PALM ISLAND SE**
83
84 City **CLEARWATER** FL 85 Zip Code **33767**

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

Robert F. Beckham
Signature, typed or printed name of registered agent required if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VC ☒ DELETE	1.1 TITLE	VC ☐ Change ☒ Addition
NAME	KOHL, RON	1.2 NAME	GIBSON, John
STREET ADDRESS	2395 SARAZEN DR	1.3 STREET ADDRESS	ISLAND WAY
CITY-ST-ZIP	DUNEDIN FL 34698	1.4 CITY-ST-ZIP	CLEARWATER FL 33767
TITLE	C ☒ DELETE	2.1 TITLE	C ☐ Change ☒ Addition
NAME	MURRAY, JOHN	2.2 NAME	BECKHAM, R.F.
STREET ADDRESS	1290 GULF BLVD #1908	2.3 STREET ADDRESS	321 PALM IS SE
CITY-ST-ZIP	CLEARWATER FL 34630	2.4 CITY-ST-ZIP	CLEARWATER FL 33767
TITLE	D ☒ DELETE	3.1 TITLE	D ☐ Change ☒ Addition
NAME	STEBBINS, CHUCH	3.2 NAME	GARRITY, JOHN
STREET ADDRESS	471 PALM ISLAND S.E.	3.3 STREET ADDRESS	672 HARBOR ISLAND
CITY-ST-ZIP	CLEARWATER FL 34630	3.4 CITY-ST-ZIP	CLEARWATER, FL 33767
TITLE	RC ☒ DELETE	4.1 TITLE	RC ☐ Change ☒ Addition
NAME	BECKHAM, FRED	4.2 NAME	BREWER, Dorothy
STREET ADDRESS	321 PALM ISLAND SE	4.3 STREET ADDRESS	ISLAND WAY
CITY-ST-ZIP	CLEARWATER FL 33767	4.4 CITY-ST-ZIP	CLEARWATER, FL 33767
TITLE	D ☒ DELETE	5.1 TITLE	RC ☐ Change ☒ Addition
NAME	STRAUSS, RUDY	5.2 NAME	WRIGHT, LINDA
STREET ADDRESS	749 SNUG ISLAND	5.3 STREET ADDRESS	3860 ANGLERS LANE
CITY-ST-ZIP	CLEARWATER FL 34630	5.4 CITY-ST-ZIP	LARGO, FL 33774
TITLE	D ☒ DELETE	6.1 TITLE	D ☐ Change ☒ Addition
NAME	WATSON, ED	6.2 NAME	DOHRMAN, FREIDA
STREET ADDRESS	736 ISLAND WAY, #408	6.3 STREET ADDRESS	781 HARBOR ISLAND
CITY-ST-ZIP	CLEARWATER FL 33767	6.4 CITY-ST-ZIP	CLEARWATER, FL 33767

14. I 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, with all other like empowered.

SIGNATURE:

Robert F. Beckham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT F. BECKHAM

4-7-99 (727) 462-2302
Date Daytime Phone #

CR2E037-(11/99)