

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90158 028 ****61.25

DOCUMENT # 737800 1. Entity Name HILLSBORO INLET SAILING CLUB, INC.					
Principal Place of Business P O BOX 5241 LIGHTHOUSE POINT, FL 33064 US			Mailing Address P O BOX 5241 LIGHTHOUSE POINT, FL 33064 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01312005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-1705899	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent WINCHELL, EILEEN C 4441 NW 8TH ST POMPAHO BEACH, FL 33066			7. Name and Address of New Registered Agent Name PAUL A. CHASSE Street Address (P.O. Box Number is Not Acceptable) 455 ASHWOOD PLACE City BOCA RATON FL Zip Code 33431		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>PAUL A. CHASSE</u> <u>Paul A. Chasse</u> <u>4/1/05</u> Signature, typed or printed name of registered agent and the, if applicable, (NOTE: Registered Agent signature required when reconstituting) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAILEY, JACK 3730 NE 30TH AVE POMPAHO BEACH, FL 33064	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JAMES D. WALLACE 1548 S.E. 9TH STREET DEERFIELD BEACH, FL 33441	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WALLACE, JAMES 1548 SE 9TH ST DEERFIELD BEACH, FL 33441	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAL STEWARD 300 N.E. 48TH COURT #304 LIGHTHOUSE POINT, FL 33064	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STEWART, HAL 3000 NE 48TH COURT #304 POMPAHO BEACH, FL 33064	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TIM LEONARD 1512 S.E. 12TH COURT DEERFIELD BEACH, FL 33441	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYNAN, DENNIS 2501 N. RIVERSIDE DR POMPAHO BEACH, FL 33062	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENNIS, TYNAN 2501 N. RIVERSIDE DR POMPAHO BEACH, FL 33062	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WINCHELL, EILEEN 4441 NW 8TH ST POMPAHO BEACH, FL 33066	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PAUL CHASSE 455 ASHWOOD PLACE BOCA RATON, FL 33431	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, DICK 1301 E. HILLSBORO BLVD #603 DEERFIELD BEACH, FL 33441	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JEFF KUNKEL 10028 NW 5TH PLACE CORAL SPRINGS, FL 33076	☒ Change ☐ Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Paul A. Chasse</u> <u>PAUL A. CHASSE</u> <u>4/1/05</u> <u>561-394-6125</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					