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Jul 29 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **769738** (6)

1. Corporation Name

MARINA POINT YACHT CLUB, INC.

Principal Place of Business

Mailing Address

**450 BASIN STREET
DAYTONA BEACH FL 32114**

**PO BOX 2605
DAYTONA BEACH FL 32115-2605**



3. Date Incorporated or Qualified **08/04/1983** 3a. Date of Last Report **08/27/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 841 Ballowh Rd	26 SAVE DAYTONA BEACH FL 32115	59-2394840	☐ Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing	☐ \$5.00 May Be Added to Fees
City & State	City & State	Trust Fund Contribution	☐
23 Daytona Bch FL	28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☒ No
Zip	Country		
24 32114	25 Volusia		
29	30		

9. Name and Address of Current Registered Agent

**SCHULZ, JEFFERYS L.
140 S. ATLANTIC AVENUE
ORMOND BEACH, FL 32175**

10. Name and Address of New Registered Agent

81 Name	BREECE A. McCRAY SR
82 Street Address (P.O. Box Number is Not Acceptable)	841 Ballowh Rd
83	
84 City	DAYTONA BEACH FL
85 Zip Code	32114

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 *Breece A. McCray Sr* (NOTE: Registered Agent signature required when reinstating) DATE **6-4-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	CD
NAME	BENTON, SUE	1.2 NAME	BREECE A. McCRAY SR
STREET ADDRESS	P.O. BOX 1805 N/A	1.3 STREET ADDRESS	841 Ballowh Rd
CITY-ST-ZIP	DAYTONA BCH FL 32115-1805	1.4 CITY-ST-ZIP	DAYTONA BEACH, FL 32115 32114
TITLE	VCD	2.1 TITLE	SEC/TREAS
NAME	VILLERS, FRED	2.2 NAME	LYNN ELLIS
STREET ADDRESS	P.O. BOX 743 N/A	2.3 STREET ADDRESS	404 S. BEACH ST #204
CITY-ST-ZIP	DAYTONA BEACH FL 32115	2.4 CITY-ST-ZIP	DAYTONA Bch FL 32114
TITLE	RCD	3.1 TITLE	VCD
NAME	REAGAN, CHARLES	3.2 NAME	TOM LANKTREE
STREET ADDRESS	C/O BARNEYS LEATHER 438 N. BEACH	3.3 STREET ADDRESS	122 BRANDY HILLS DR
CITY-ST-ZIP	DAYTONA BEACH FL 32114	3.4 CITY-ST-ZIP	PORT ORANGE, FL 32119
TITLE	SD	4.1 TITLE	
NAME	CLINTON, KATHRYN	4.2 NAME	
STREET ADDRESS	112 BEVERLY COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	
NAME	SCHILZ, JEFFERYS L	5.2 NAME	
STREET ADDRESS	112 BEVERLY COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BCH FL 32114	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(l), 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.

CR2E037 (9/96)