

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90416 037 ****61.25

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04252006 Chg-NP CR2E037 (11/05)

DOCUMENT # N00000002712					
1. Entity Name TSS YOUTH SAILING, INC.					
Principal Place of Business 1250 APOLLO BEACH BLVD APOLLO BEACH, FL 33572			Mailing Address PO BOX 3277 APOLLO BEACH, FL 33572		
2. Principal Place of Business		3. Mailing Address 235 APOLLO BEACH BLVD.			
Suite, Apt. #, etc.		Suite, Apt. #, etc. # 101			
City & State		City & State APOLLO BEACH FL			
Zip	Country	Zip	Country	4. FEI Number 59-3643423	
33572-2251				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DALTON, O. MATTHEW 6334 COCOA LANE APOLO BEACH, FL 33572				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ Signature of registered agent or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	DP LOWE, LARRY 504 FINGER LAKES PL SEFFNER, FL 33584	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BORDE, RICHARD 3813 BENT TREE LOOP LAKELAND, FL 33813	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3813 BENT TREE LOOP EAST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GOCEK, BRUCE 6337 COTTONWOOD LANE APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BISHOP SUSAN 3819 HWY 579 WIMAUMA, FL 33598	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DALTON, OLEN MATHEW 6334 COCOA LANE APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORRER, BILL J. 1028 APOLLO BEACH BLVD, #115 APOLLO BEACH, FL 33572	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BONNER, DIANNE L 6823 EXETER PK PL APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BETTINGER, ROBERT W. 604 KINGSTON COURT APOLLO BEACH, FL 33572	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DARCY, STEVE 922 ALEGRO LANE APOLLO BEACH, FL 33572	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: RICHARD BORDE 4/25/06 862-292-9694 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT
400 76538

DOCUMENT #N00000002712

TSS YOUTH SAILING, INC.

2006 ANNUAL REPORT

ADDITIONAL DIRECTORS

D

SHAW, BOB

6520 SENEGAL PALM WAY

APOLLO BEACH, FL 33572

D

SIELE, WILLIAM

635 JAMAICA CIRCLE E

APOLLO BEACH, FL 33572

D

SIELE, CLAIRE

635 JAMAICA CIRCLE E

APOLLO BEACH, FL 33572