2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000002643

1. Entity Name
STORM TRYSAIL CLUB-SOUTHERN STATION, INC.

Principal Place of Business	Mailing Address
1374 SE 14 ST FT LAUDERDALE, FL 33316	1374 SE 14 ST FT LAUDERDALE, FL 33316

08082006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0926221
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEAGHER, ROBERT J JR
1374 SE 14 ST
FT LAUDERDALE, FL 33316

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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 _____ August 9, 2006
Signature, typed 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 September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DST
NAME	MEAGHER, ROBERT J JR
STREET ADDRESS	1374 SE 14 ST
CITY-ST-ZIP	FT LAUDERDALE, FL 33316
TITLE	DP
NAME	GILLETTE, DENNIS
STREET ADDRESS	2000 S OCEAN LN
CITY-ST-ZIP	FT LAUDERDALE, FL 33316
TITLE	D
NAME	BATZER, KEN
STREET ADDRESS	2765 NE 22 AVE
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064
TITLE	D
NAME	BOWIE, JOEL
STREET ADDRESS	700 ELM TREE LN
CITY-ST-ZIP	BOCA RATON, FL 33484
TITLE	D
NAME	MEAGHER, ROBERT J III
STREET ADDRESS	800 SW 16 CT
CITY-ST-ZIP	FT LAUDERDALE, FL 33315
TITLE	D
NAME	MILLER, TIM
STREET ADDRESS	530 S FEDERAL HWY
CITY-ST-ZIP	FT LAUDERDALE, FL 33316

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08/18/06-80001-025 70.00

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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: _____ August 9, 2006 (954) 763-6621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #