

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 30 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morfham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N07292 (8)
1. Corporation Name
PLATINUM POINT YACHT CLUB, INC.



Principal Place of Business 3601 CAPE COLE BLVD PUNTA GORDA FL 33955 US	Mailing Address 3601 CAPE COLE BLVD PUNTA GORDA FL 33955 US
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3. Date Incorporated or Qualified
01/24/1985

4. FEI Number 59-2601311	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business 21	2a. Mailing Address 26
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
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6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

City & State 23	City & State 28
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7. Is this nonprofit corporation a homeowners association?
 Yes No

Zip 24	Country 25	Zip 29	Country 30
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8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**CLARK, CAROL M.
3601 CAPE COLE BLVD
PUNTA GORDA FL 33955**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SIMMONS, GEORGE A.		1.2 NAME Richard G. Valente	
STREET ADDRESS 2845 W MARION #812		1.3 STREET ADDRESS 24312 Contra Costa Lane	
CITY-ST-ZIP PUNTA GORDA FL		1.4 CITY-ST-ZIP Punta Gorda, FL 33955	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SHOOP, HAMILTON		2.2 NAME	
STREET ADDRESS 900 ISLAMORADA BLVD		2.3 STREET ADDRESS	
CITY-ST-ZIP PUNTA GORDA FL		2.4 CITY-ST-ZIP	
TITLE S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MARTINE, CAROLE		3.2 NAME	
STREET ADDRESS 2380-62B SOUTH SHORE DRIVE		3.3 STREET ADDRESS	
CITY-ST-ZIP PUNTA GORDA FL		3.4 CITY-ST-ZIP	
TITLE P	<input type="checkbox"/> DELETE	4.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DEWALT, EARL W.		4.2 NAME	
STREET ADDRESS 1401 SURFBIRD COURT		4.3 STREET ADDRESS	
CITY-ST-ZIP PUNTA GORDA FL		4.4 CITY-ST-ZIP	
TITLE D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME INGERSON, HELEN		5.2 NAME Paul R. Roy	
STREET ADDRESS 3220-34 C SO. SHORE DR.		5.3 STREET ADDRESS 2001 King Tarpon Drive	
CITY-ST-ZIP PUNTA GORDA FL		5.4 CITY-ST-ZIP Punta Gorda, FL 33955	
TITLE T	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME COVERT, DELORES D.		6.2 NAME	
STREET ADDRESS 1405 ISLAMORADA BLVD		6.3 STREET ADDRESS	
CITY-ST-ZIP PUNTA GORDA FL		6.4 CITY-ST-ZIP	

CR2E037 (10/97)

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.

SIGNATURE: **Richard G. Valente** *Richard G. Valente* 3/30/98 941-639-0733