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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N07292

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

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

01/24/1985

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2601311

Applied For
 Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, CAROL M.
 3601 CAPE COLE BLVD
 PUNTA GORDA FL 33955

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P DELETE
 NAME VALENTE, RICHARD G
 STREET ADDRESS 24312 CONTRA COSTA LANE
 CITY-ST-ZIP PUNTA GORDA FL 33955

1.1 TITLE D Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE D DELETE
 NAME SHOOP, HAMILTON
 STREET ADDRESS 900 ISLAMORADA BLVD
 CITY-ST-ZIP PUNTA GORDA FL

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE S DELETE
 NAME MARTINE, CAROLE
 STREET ADDRESS 2360-62B SOUTH SHORE DRIVE
 CITY-ST-ZIP PUNTA GORDA FL

3.1 TITLE S Change Addition
 3.2 NAME ALLEN, BETTY M
 3.3 STREET ADDRESS 17813 Hibiscus Cove Court
 3.4 CITY-ST-ZIP Punta Gorda, FL 33955

TITLE D DELETE
 NAME DEWALT, EARL W.
 STREET ADDRESS 1401 SURFBIRD COURT
 CITY-ST-ZIP PUNTA GORDA FL

4.1 TITLE D Change Addition
 4.2 NAME WALTERS, LEWIS W
 4.3 STREET ADDRESS 4001 CAPE COLE BLVD
 4.4 CITY-ST-ZIP PUNTA GORDA, FL 33955

TITLE D DELETE
 NAME ROY, PAUL R
 STREET ADDRESS 2001 KING TARPON DRIVE
 CITY-ST-ZIP PUNTA GORDA FL 33955

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE T DELETE
 NAME COVERT, DELORES D.
 STREET ADDRESS 1405 ISLAMORADA BLVD
 CITY-ST-ZIP PUNTA GORDA FL

6.1 TITLE T Change Addition
 6.2 NAME ADGATE, LOREN C
 6.3 STREET ADDRESS 3245 24A SUGARLOAF KEY RD
 6.4 CITY-ST-ZIP PUNTA GORDA, FL 33955

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, with all other like empowered.

SIGNATURE:

[Signature] DIRECTOR/VICE COMMODORE
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director/Vice Commodore/26/99

941-639-0733

Date

Daytime Phone #

CR2E037 (11/98)