

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N37461 (3)

1. Corporation Name
ADMIRALS COVE YACHT CLUB, INC.



Principal Place of Business 200 ADMIRALS COVE BLVD. JUPITER FL 33477	Mailing Address 200 ADMIRALS COVE BLVD. JUPITER FL 33477
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3. Date Incorporated or Qualified
03/28/1990

4. FEI Number
65-0182857

Applied For	Not Applicable
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

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

**SPANIER, LAWRENCE
246 EAGLE DR
JUPITER FL 33477**

10. Name and Address of New Registered Agent

81 Name PETERSON, KATHERINE Y
82 Street Address (P.O. Box Number is Not Acceptable) 446 MARINER DRIVE
83
84 City JUPITER
85 Zip Code FL 33477

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]* DATE: **April 29, 1998**

Signature, typed or printed name of registered agent and if not applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DVC	<input type="checkbox"/> DELETE
NAME	NORDIN, ROBERT	
STREET ADDRESS	904 CAPTAINS WAY	
CITY-ST-ZIP	JUPITER FL	
TITLE	DC	<input checked="" type="checkbox"/> DELETE
NAME	SPANIER, LAWRENCE	
STREET ADDRESS	246 EAGLE DR.	
CITY-ST-ZIP	JUPITER FL	
TITLE	DRC	<input type="checkbox"/> DELETE
NAME	PETERSON, KATHERINE	
STREET ADDRESS	446 MARINER DR.	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	DRC
2.3 STREET ADDRESS	STARK, AL
2.4 CITY-ST-ZIP	356 EAGLE DRIVE JUPITER, FL. 33477
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *[Signature]* DATE: **May 1998**

CF2E037 (10/97)