

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90265 020 ****61.25

DOCUMENT # N36989

1. Entity Name

ANCHOR BOAT CLUB, INC.



Principal Place of Business

% LOUIS BOHN
13 CLEARVIEW CT. NORTH
PALM COAST FL 32137
US

Mailing Address

ANCHOR BOAT CLUB, INC.
PO BOX 351501
PALM COAST FL 32135-1501
US



2. Principal Place of Business

RICHARD COHEN
Suite, Apt. #, etc.
6 CHESNEY COURT

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

PALM COAST FL

City & State

4. FEI Number

59-3047602

Applied For

Not Applicable

Zip

32137

Country

USA.

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUNTARP, PAUL M JR
185 CPYRESS PT PKWY
STE 6
PALM COAST FL 32164

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **CD** ☒ Delete
NAME **BOHN, LOUIS**
STREET ADDRESS **13 CLEARVIEW COURT NORTH**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE **VCD** ☒ Delete
NAME **COHEN, ASA**
STREET ADDRESS **6 CHESNEY CT**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE **SD** ☐ Delete
NAME **DINO, PATRICIA H**
STREET ADDRESS **9 WILSON PLACE**
CITY-ST-ZIP **PALM COAST FL 32164**

TITLE **TD** ☐ Delete
NAME **NIELSEN, THOMAS J**
STREET ADDRESS **28 CLINTON COURT NORTH**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE **RC** ☐ Delete
NAME **BALLA, RUTH**
STREET ADDRESS **27 CLEARVIEW COURT NORTH**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE **FC** ☐ Delete
NAME **ANTONELLI, JOHN**
STREET ADDRESS **4 CEDAR COURT**
CITY-ST-ZIP **PALM COAST FL 32137**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CD** ☒ Change ☐ Addition
NAME **RICHARD COHEN**
STREET ADDRESS **6 CHESNEY COURT**
CITY-ST-ZIP **PALM COAST, FL 32137**

TITLE **VCD** ☒ Change ☐ Addition
NAME **CHARLES DETBONET**
STREET ADDRESS **6 CEDAR FORD COURT**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **Thomas J. Nielsen** **THOMAS J. NIELSEN** **3/20/06 (389) 447-7422**