

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26072

FILED  
Mar 01, 2007  
Secretary of State

Entity Name: THE ADMIRALTY YACHT CLUB, INC.

## Current Principal Place of Business:

ADMIRALTY YACHT CLUB INC.  
P O BOX 326  
PALM CITY, FL 34991 US

## New Principal Place of Business:

ADMIRALTY YACHT CLUB INC.  
1150 SW CHAPMAN WAY  
PALM CITY, FL 34991 US

## Current Mailing Address:

ADMIRALTY YACHT CLUB INC.  
P O BOX 326  
PALM CITY, FL 34991 US

## New Mailing Address:

FEI Number: 65-0354767      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WARREN, ALFRED B  
1150 SW CHAPMAN WAY #308  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GRASSICK, PATRICK  
Address: 1150 SW CHAPMAN WAY #301  
City-St-Zip: PALM CITY, FL 34990

Title: VP ( ) Delete  
Name: ZIELKE, ROGER,  
Address: 1140 SW CHAPMAN WAY, #405  
City-St-Zip: PALM CITY, FL 34990

Title: SD ( ) Delete  
Name: FOSTER, JAMES  
Address: 1170 SW CHAPMAN WAY #109  
City-St-Zip: PALM CITY, FL 34990

Title: TD ( ) Delete  
Name: WARREN, ALFRED B  
Address: 1150 SW CHAPMAN WAY, #308  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFRED B. WARREN

TD

03/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date