

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004082

**Entity Name:** NETTLES ISLAND MEN'S CLUB, INC.

**Current Principal Place of Business:**

30 NETTLES BLVD  
JENSEN BEACH, FL 34957

**Current Mailing Address:**

30 NETTLES BLVD  
JENSEN BEACH, FL 34957 US

**FEI Number:** 46-5737362

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PETERSON, JAMES BRUCE  
406 NETTLES BLVD  
JENSEN BEACH, FL 34957 US

*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:** JAMES PETERSON

04/04/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BELLAVANCE, RICHARD  
Address        978 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title            VP  
Name            LLOYD, DAVID  
Address        573 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title            S  
Name            ERICKSON, KEN  
Address        30 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title            T  
Name            PETERSON, JAMES  
Address        406 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title            VP  
Name            JONES, WALTER  
Address        1021 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

Title            VP  
Name            VITALE, JAMES  
Address        153 NETTLES BLVD  
City-State-Zip: JENSEN BEACH FL 34957

*I hereby 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 all other like empowered.*

**SIGNATURE:** JAMES PETERSON

**TREASURER**

04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date