

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26072

**FILED**  
**Jan 06, 2020**  
**Secretary of State**  
**6215014460CC**

**Entity Name:** THE ADMIRALTY YACHT CLUB, INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 65-0354767

**Certificate of Status Desired:** No

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

FRASH, MARIE D  
1130 SW CHAPMAN WAY #509  
PALM CITY, FL 34990 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

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

Title VP  
Name ZIELKE, ROGER  
Address 1140 SW CHAPMAN WAY, #411  
City-State-Zip: PALM CITY FL 34990

Title SD  
Name GONNAM, GAIL  
Address 1130 SW CHAPMAN WAY #403  
City-State-Zip: PALM CITY FL 34990

Title TD  
Name FRASH, MARIE D  
Address 1130 SW CHAPMAN WAY, #509  
City-State-Zip: PALM CITY FL 34990-2471

Title BOARD MEMBER  
Name PLACEK, RICHARD  
Address 1150 SW CHAPMAN WAY  
UNIT 311  
City-State-Zip: PALM CITY FL 34990

*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:** MARIE D FRASH

**TREASURER**

**01/06/2020**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date