

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90167 004 ****61.25

DOCUMENT # 700015

1. Entity Name
PORT CHARLOTTE YACHT CLUB, INC.



Principal Place of Business
**22445 GLASS LANE
PORT CHARLOTTE, FL 33980 US**

Mailing Address
**P.O. BOX 494051
PORT CHARLOTTE, FL 33949-4051 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1117295

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MUSCO, CAROL L
19188 WATERBURY COURT
PORT CHARLOTTE, FL 33948**

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

Carol L Musco

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/06

**Filing 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 **R** ☒ Delete
NAME **CORBETT, BARRY**
STREET ADDRESS **350 SEVERIN ROAD SE**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33952**

TITLE **FC** ☒ Delete
NAME **MUSCO, GEORGE J**
STREET ADDRESS **19188 WATERBURY COURT**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **P** ☒ Delete
NAME **MILROY, JOSEPH**
STREET ADDRESS **1019 LUCIA DR**
CITY-ST-ZIP **PUNTA GORDA, FL 33950**

TITLE **V** ☒ Delete
NAME **PREFONTAINE, HAROLD**
STREET ADDRESS **3266 BEACON DR**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33980**

TITLE **T** ☐ Delete
NAME **MUSCO, CAROL**
STREET ADDRESS **19188 WATERBURY COURT**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **AT** ☐ Delete
NAME **SAFFER, CARLA**
STREET ADDRESS **3101 BAMBOO COURT**
CITY-ST-ZIP **PUNTA GORDA, FL 33950**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE **R** ☒ Change ☒ Addition
NAME **BOB WYNE**
STREET ADDRESS **2682 AUBURN BLVD**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **FC** ☒ Change ☐ Addition
NAME **DAN CHESKY**
STREET ADDRESS **18625 KUNGLER CIRCLE**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **V** ☒ Change ☐ Addition
NAME **CONNIE SHUBERT**
STREET ADDRESS **2096 PELLAM BLVD**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **P** ☒ Change ☐ Addition
NAME **HAROLD PREFONTAINE**
STREET ADDRESS **3266 BEACON DR**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33980**

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 Chapter 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:

Carol L Musco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/06

Date

941 629 1467

Daytime Phone #