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Apr 14 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **700556** (4)

1. Corporation Name

**ROYAL PALM YACHT AND COUNTRY CLUB, INC.**

Principal Place of Business

Mailing Address

**2425 MAYA PALM DR WEST  
BOCA RATON FL 33432**

**2425 MAYA PALM DR WEST  
BOCA RATON FL 33432**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

Country

**28** Zip

Country

**24**

**25**

**29**

**30**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**03/01/1960**

4. FEI Number

**59-0873777**

Applied For

Not Applicable

6. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

8. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**SUTO, ALEXANDER L E  
LAKE WYMAN PLAZA  
2424 N FEDERAL HWY STE 405  
BOCA RATON FL 33432**

81 Name

**Siciliano, Thomas V.**

82 Street Address (P.O. Box Number is Not Acceptable)

**980 N Federal Hwy, Ste 440**

83

84 City

**Boca Raton**

**FL**

85 Zip Code

**33432**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

*Thomas V. Siciliano*  
Signature of registered agent and title if applicable.

**Thomas V. Siciliano, Legal Counsel** 3/25/98  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DETRICH, MERRILL A.**  
STREET ADDRESS **2275 ARECA PALM WAY**  
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☒ DELETE

NAME **DRC**  
STREET ADDRESS **MIDDLEBROOK, II BRADLEY**  
CITY-ST-ZIP **1801 ROYAL PALM WAY  
BOCA RATON FL**

TITLE ☐ DELETE

NAME **DVC**  
STREET ADDRESS **MULLIGAN, RAYMOND J.**  
CITY-ST-ZIP **700 S OCEAN BLVD., APT 1203  
BOCA RATON FL**

TITLE ☒ DELETE

NAME **DC**  
STREET ADDRESS **POTAK, PHILIP J.**  
CITY-ST-ZIP **2400 SILVER PALM RD. W.  
BOCA RATON FL**

TITLE ☐ DELETE

NAME **S**  
STREET ADDRESS **DONAHUE, VINCENT P.**  
CITY-ST-ZIP **1600 SABAL PALM DR  
BOCA RATON FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Merrill A. Detrich*  
**Merrill A. Detrich**

3/25/98

561-395-2100

CR2E037 (10/97)