FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 700556

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

FILED Apr 02, 1999 8:00 am § Secretary of State

04-02-1999 90010 004 ****61.25



2. Principal Pl	Place of Business 2a. Mailing Address						3. Date Incorporated or Qualified 03/01/1960				
21	26							<u></u>		5, 54,	==
Suitē, Apt.	ot. #, etc. Suite, Apt. #, etc.						4 FEI Number 59-0873777		<u></u>	lied For	
22	27						99-00/3///			Applicable	
City & State City & State							5. Certificate of Status Desi	ired 🗌	\$8.75 A		
Zip	Country Zip				Country		6. Election Campaign Final	ncing	\$5.00	May Ro	l
	25 29 30				*		Trust Fund Contribution	\$5.00 May Be Added to Fees			
24 25 29 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
• Name and Address of Current Registered Agent					81 Name						
OLOHUANO TUOMAO V					THOMAS V. SICILIANO						
SICILIANO, THOMAS V					82 Street Address (P.O. Box Number is Not Acceptable) # 440						
980 N FEDERAL HWY SUITE 440					83	00 1	1. 1 LUL. 14	11111	<u> </u>		ĺ
2424 N FEDERAL HWY STE 405											
BOCA RATON FL 33432					B4 City	COCF	+ RATON	F	L 85 Zip C	%32 432	ĺ
40 - the 047 0500 and 047 1500 Floride Statutes the object ground correction 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 5.25 period 617.0503, Florida Statutes.											
	m tamillar with, and accept the obligate	A.	7 11 M.	a Clair	J. 103.			3/25	-/99		ĺ
SIGNATURE	Signature, typed of printed name of egistered agent	and little	if applicable. (NOTE: Re	gistered	Agent signature r	equired wh	en reinstating)	DATE	/ · /		6
12.	OFFICERS AND			13.			ADDITIONS/CHANGES	O OFFICERS	AND DIRECTO	RS IN 12	5
TITLE	T		DELETE	1.1 Π	TLE .	T			☐ Change	XX Addition	:
NAME	DEITRICH, MERRILL A.			1.2 N	WE	Can	non, John				100
STREET ADDRESS	2275 ARECA PALM WAY			1.3 51	REET ADDRESS	287	l North Ocean	n Blvd.	.Verona	ı 163	6
CITY-ST-ZIP	BOCA RATON FL		!		TY-ST-ZIP	Boc	a Raton. FL	33431			1 8
TITLE	DRC		DELETE	2.1 Π		DVC	· · · · · · · · · · · · · · · · · · ·			Addition	١
NAME	SICILIANO, ANTHONY N			2.2 N	WE.	D V C	•				
-STREET ADDRESS:	2920-VIA NAPOLI	~ بـ		·2.3 ST	REET ADORESS						<u> _</u>
CITY-ST-ZIP					TY-ST-ZIP						<u> </u>
TITLE	DC		₩ DELETE	3.1 11		S			☐ Change	Addition	
NAME	MULLIGAN, RAYMOND J.			3.2 N		Ril	1 T. Smith,	Ir:			
			4				Via Cabana			•	
	BOCA RATON FL		•	ŧ	ITY-ST-ZIP		a Raton, FL	33432			
CITY-ST-ZIP	S		☐ DELETE	4.1 TI		DRC		:=	☐ Change	☐ Addition	
	7		D	4.2 N		DRO			-		
NAME	LAVALLEY, RICHARD 1779 SABAL PALM DR				REET ADDRESS	}					Ì
STREET ADDRESS									•		
CITY-ST-ZIP	BOCA RATON FL 33432		☐ DELETE	4.4 C	TY-ST-ZIP	DC	· · · · · · · · · · · · · · · · · · ·		XX Change	☐ Addition	1
TITLE			Doctor	5.1 N		שנו			1111		ĺ
NAME	DONAHUE, VINCENT P.				REET ADDRESS						
STREET ADDRESS				1	TY-ST-ZIP	}				•	1
CITY-ST-ZIP	BOCA RATON FL		רו חבו כדב	6.1 Ti					Change	Addition	1
πLE			☐ DELETE	•				•	. L. Change		'
NAME				6.2 N				,			
STREET ADDRESS					REET ADDRESS						
CITY-ST-7IP				6.4 C	TY-ST-ZIP	1					1

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 9n an attachment with an address, with all other like empowered.

SIGNATURE: