

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702602

FILED
Jan 11, 2006
Secretary of State

Entity Name: STUART SAILFISH CLUB INC

Current Principal Place of Business:

4307 SE BAYVIEW STREET
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1498
PORT SALERNO, FL 34992 US

New Mailing Address:

FEI Number: 59-6155063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALENIUS, BARBARA
5303 SE REEF WAY
STUART, FL 34997 US

Name and Address of New Registered Agent:

SARNO, ROBIN
8868 SW TROPICAL AVE
STUART, FL 34997 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: ROBIN SARNO

01/11/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: BOLIN, FRANK
Address: 2700 S KANNER HWY.
City-St-Zip: STUART, FL 34994

Title: P () Delete
Name: GRELL, FREDERICK
Address: 6940 SE CONSTITUTION BLVD., #3-105
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: WALENIUS, RICK
Address: 5303 SE REEF WAY
City-St-Zip: STUART, FL 34997

Title: S () Delete
Name: GRELL, MARY JO
Address: 6940 SE CONSTITUTION BLVD., #3-105
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: WALENIUS, BARBARA
Address: 5303 SE REEF WAY
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: ANDERSON, ROBERT
Address: 4204 SE CENTERBOARD LANE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: KUBIAK, ANDY
Address: 5398 SE MANOR WAY
City-St-Zip: STUART, FL 34997

Title: V (X) Change () Addition
Name: WICHERS, TOM
Address: 4393 SE INLET PLACE
City-St-Zip: STUART, FL 34997

Title: S (X) Change () Addition
Name: WICHERS, SARAH
Address: 4393 SE INLET PLACE
City-St-Zip: STUART, FL 34997

Title: T (X) Change () Addition
Name: FORBES, JIM
Address: 2336 SE OCEAN BLVD PMB 397
City-St-Zip: STUART, FL 34996

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SARAH WICHERS

S

01/11/2006

Electronic Signature of Signing Officer or Director

Date