

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 14, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90064 021 \*\*\*\*61.25

**DOCUMENT # 714769**

1. Entity Name

**THE GULF STREAM YACHT CLUB**



Principal Place of Business

**770 NE 37TH ST.  
BOCA RATON FL 33431**

Mailing Address

**770 NE 37TH ST.  
BOCA RATON FL 33431**

**24042630**



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1002366**

Applied For

Not Applicable

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

**KIMMEN, JACQUELINE  
770 NE 37TH ST.  
BOCA RATON FL 33431**

Name **BERNARD A SILVER**

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

**200 MACFARLANE DRIVE #303**

City **DELRAY BEACH**

**FL**

Zip Code **33483**

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

*[Signature]*

**BERNARD R SILVER**

**4/10/04**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

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 **VD** ☐ Delete  
NAME **LANE, JOE**  
STREET ADDRESS **3411 SPANISH TRAIL #C-423**  
CITY-ST-ZIP **DELRAY BEACH FL 33483**

TITLE **VCD** ☐ Delete  
NAME **HELMOLD, KAREN**  
STREET ADDRESS **3240 JASMINE DR**  
CITY-ST-ZIP **DELRAY BEACH FL 33483**

TITLE **VD** ☐ Delete  
NAME **RESSLER, ROBERT**  
STREET ADDRESS **4306 A SOUTH OCEAN BLVD**  
CITY-ST-ZIP **HIGHLAND BEACH FL 33487**

TITLE **TD** ☐ Delete  
NAME **FRITTS, ADDISON D.**  
STREET ADDRESS **3411 SPANISH TRAIL C417**  
CITY-ST-ZIP **DELRAY BEACH FL**

TITLE **VD** ☐ Delete  
NAME **HANUSCHAK, MICHAEL**  
STREET ADDRESS **3120 JASMINE DRIVE**  
CITY-ST-ZIP **DELRAY BEACH FL 33483**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 exemption stated in Section 119.07(3)(i), 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:

*[Signature]* **BERNARD R. SILVER**

**4/10/04**

**561-278-7264**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #