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

Feb 04, 2004 8:00 am Secretary of State **DOCUMENT # 724824** 1. Entity Name 02-04-2004 90066 046 ****61.25 TORTUGA CLUB, INC. Principal Place of Business Mailing Address 8730 MIDNIGHT PASS RD. 8730 MIDNIGHT PASS RD. SARASOTA FL 34242 SARASOTA FL 34242 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) 4. FEI Number City & State City & State Applied For 59-1655646 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Address (P.O. Box Number is Not Acceptable 750 Michigan PASS MERRITT, BILL 8710 MIDNIGHT PASS RD 101B SARASOTA FL 34242 JARASOJA 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Addition TITLE ☐ Delete MERRITT, BILL NAME NAME 8710 MIDNIGHT PASS RD 101B STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 CITY - ST-ZIP CITY-ST-7IP VPD Change Delete TITLE TITLE Addition KELLY, JOHN NAME NAME 9750 MIDNIGAT PASS RD 405 C STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 CITY-ST-ZIP CITY-ST-ZIP SD TITLE Change ☐ Addition ☐ Delete TITLE PATTERSON: DAVE-NÂME NAME 8730 MIDNIGHT PASS RD. #500A STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition PETER, KYLE NAME NAME 8750 MIDNIGHT PASS RD 104 A STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE APFEL, SID NAME NAME 8750 MIDNIGHT PASS RD 20213 STREET ADDRESS STREET ADDRESS SARASOTA FL 30242 CITY-ST-ZIP CITY-ST-ZIP CARDL COOKE "S" \$00 8750 MIDNIGHT ASS RD 101C ☐ Delete TITLE COOLLE, CAROL NAME NAME 8750 MIDNIGHT PASS RD 101 C STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 City-St-7iP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED