

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90329 024 ****61.25

DOCUMENT # 735203

1. Entity Name
ISLES YACHT CLUB, INC.



Principal Place of Business
**1780 W MARION AVE
PUNTA GORDA, FL 33950 US**

Mailing Address
**1780 W MARION AVE
PUNTA GORDA, FL 33950 US**

50010353



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03302006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1673859

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

**EMERICH, GUY S.
115 E. OLYMPIA AVENUE
PUNTA GORDA, FL 33950**

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DAWSON, FRED
434 VIA CINTIA
PUNTA GORDA, FL 33950** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STARSMAN, RAY
1218 SAN MATAEO
PUNTA GORDA, FL 33950** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BIRCH, BRIAN
761 VIA ESPLANADE
PUNTA GORDA, FL 33950** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STEWART, LARRY
1135 SOCORRO DR
PUNTA GORDA, FL 33950** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**FO
HITTON, EDMUND T
2150 CHARLOTTE AMALIE CT.
PUNTA GORDA, FL 33950** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
THOMAS, JANET M
250 LIDO DR
PUNTA GORDA, FL 33950** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Donna Randles
2119 Wyatt Cr
Punta Gorda FL 33950** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Richard Condon
83 Ocean Dr
Punta Gorda FL 33950** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**FO
William P Cote
522 Eleuthera Dr
Punta Gorda FL 33950** ☐ Change ☒ Addition

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

William P Cote
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-31-06 94-639-7551