

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90187 022 ****61.25

DOCUMENT # 750423

1. Entity Name

WINDJAMMER YACHT CLUB, INC.

Principal Place of Business

Mailing Address

**CLUBHOUSE
 1850 PALM CITY ROAD
 STUART FL 34994**

**CLUBHOUSE
 1850 PALM CITY ROAD
 STUART FL 34994**

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

59-1960126

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

**MARTIN, DIANE
 1850 PALM CITY RD
 WP 104
 STUART FL 34994**

Name

HOLLIS, ED

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

1868 S.W. PALM CITY RD #205

City

STUART,

FL

Zip Code

34994

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.

SIGNATURE

Susan L. Thornham

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Mar. 04/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	CPD	<input checked="" type="checkbox"/> Delete
NAME	FOX, FRED	
STREET ADDRESS	1850 PALM CITY RD BM 201	
CITY-ST-ZIP	STUART FL 34994	
TITLE	VCT	<input checked="" type="checkbox"/> Delete
NAME	JORGENSEN, DONALD	
STREET ADDRESS	1850 PALM CITY RD C5201	
CITY-ST-ZIP	STUART FL 34994	
TITLE	TD	<input type="checkbox"/> Delete
NAME	THORNHAM, SUSAN	
STREET ADDRESS	1850 PALM CITY RD WP 205	
CITY-ST-ZIP	STUART FL 34994	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MARTIN, DIANE	
STREET ADDRESS	1850 PALM CITY RD WP104	
CITY-ST-ZIP	STUART FL 34994	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WILLOUGHBY, GAIL	
STREET ADDRESS	1850 PALM CITY RD SE 102	
CITY-ST-ZIP	STUART FL 34994	
TITLE	FCT	<input checked="" type="checkbox"/> Delete
NAME	HANNAN, JOHN	
STREET ADDRESS	1850 PALM CITY RD PA 103	
CITY-ST-ZIP	STUART FL 34994	

TITLE	CPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STRATTON, WM.	
STREET ADDRESS	1854 SW. PALM CITY RD # 102	
CITY-ST-ZIP	STUART, FL 34994	
TITLE	VCT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLIS, ED	
STREET ADDRESS	1868 SW. PALM CITY RD #205	
CITY-ST-ZIP	STUART, FL 34994	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THORNHAM, SUSAN	
STREET ADDRESS	1862 SW PALM CITY RD #205	
CITY-ST-ZIP	STUART, FL 34994	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLOUGHBY, GAIL	
STREET ADDRESS	1860 SW PALM CITY RD #102	
CITY-ST-ZIP	STUART, FL 34994	
TITLE	FCT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HANNAN, JOHN	
STREET ADDRESS	1864 SW PALM CITY RD #103	
CITY-ST-ZIP	STUART, FL 34994	
TITLE	RCPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ASTLEY, SAM	
STREET ADDRESS	1856 SW PALM CITY RD #106	
CITY-ST-ZIP	STUART, FL 34994	

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:

Susan L. Thornham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar. 04/02

Date

772-781-9415

Daytime Phone #

CR2E037 (9/01)