

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2001 8:00 am
Secretary of State
 03-28-2001 90219 034 ****61.25

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DOCUMENT # 752525

1. Entity Name

FORT PIERCE YACHT CLUB, INC.

Principal Place of Business

700 INDIAN RIVER DR.
 FORT PIERCE FL 34948-0108

Mailing Address

P.O. BOX 3108
 FORT PIERCE FL 34948-0108

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

59-2005180

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

**DICKERT, JOHN
 5335 MONTEGO CIR
 FT. PIERCE FL 34949**

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.

SIGNATURE

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**

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 NAME STREET ADDRESS CITY-ST-ZIP	TD EDRIDGE, JOHN M 5406 EAGLE DR FT PIERCE FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGRAVE, DIANE 3207 S LAKEVIEW CIR #201 FT PIERCE FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEN LELLY 6190 EMERSON AVE FT PIERCE FL 34951	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAFFEE, NANCY E 530 EAST FOREST TR FT PIERCE FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMBERT, JIM 207 MARINA DR FORT PIERCE FL 34949	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANAROS, ANNA PO BOX 1722 FORT PIERCE FL	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D ARLAND PHELPS, ARLAND 1910 SAND DOLLAR WAY VERO BEACH, FL 32963	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D FAHEY, EDWARD 1310 BAYSHORE DRIVE FORT PIERCE, FL 34949	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D MACVEETY, BOB 33 VILLA BLANCA FORT PIERCE, FL 34951-2824	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steel, Philip 2030 HARBORVIEW DR. SUITE B FORT PIERCE, FL 34946	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAUFFMAN, CATHY 8204 LAKEVIEW BLVD FORT PIERCE, FL 34951	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D SCHMIDT, ALYCE 400 N AIR #421 FORT PIERCE, FL 34949	☐ Change ☒ Addition

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:

Arlande Phelps **ARLANDE PHELPS 3/20/2001**

561-234-8211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)