

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

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90025 048 ****61.25

DOCUMENT # 753939

1. Entity Name

VANDERBILT YACHT & RACQUET CLUB CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

11030 GULF SHORE DRIVE
NAPLES FL 34108
US

Mailing Address

11030 GULF SHORE DRIVE
NAPLES FL 34108
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BOERGER, WALTER
11030 GULF SHORE DR.
NAPLES FL 34108

7. Name and Address of New Registered Agent

Name KAREN YOUNG
Street Address (P.O. Box Number is Not Acceptable) 9917 STRIKE LANE
239-597-3734
City Bonita Springs FL Zip Code 34135

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, ☒ the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE KAREN YOUNG

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

(NOTE: Registered Agent signature required when reinstating)

2/13/04

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 NAME STREET ADDRESS CITY - ST - ZIP	DV HORNSBY, DOT 3210 MONROE RD. MIDLAND MI 48640 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ELINE, BILL 30539 PINETREE RD. #225 CLEVELAND OH 44124 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FRANCKE, GLENN 30790 LAKEWOOD DR. HARTLAND WI 53029 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BOERGER, WALTER 11030 GULF SHORE DR #301 NAPLES F <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT FISHER, ROBERT 610 COLUMBUS AVE SANDUSKY OH <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D REINECKER, CHARLES 5218 SCENERY DR PITTSBURGH PA <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BUZZ GALLIERS 284 Country Club Dr. Goldwater, MI 49036 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALAN Wehr 5021 Wooddale Lane Minneapolis, MN 55424 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Buzz Galliers Buzz Galliers, President 2/7/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #