


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90359 048 \*\*\*\*70.00

**DOCUMENT # 756319**

1. Entity Name  
**NETTLES ISLAND YACHT CLUB, INC.**



Principal Place of Business  
**NETTLES ISLAND**  
**JENSEN BEACH, FL 34957 US**

Mailing Address  
**421 NETTLES BLVD.**  
**JENSEN BEACH, FL 34957 US**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
**773 Nettles Blvd.**  
 Suite, Apt. #, etc.

04172006 Chg-NP CR2E037 (11/05)

City & State  
**Jensen Beach, FL**

Zip  
**34957**

Country  
**USA**

4. FEI Number  
**59-2243889**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**BARLOW, TED**  
**624 NETTLES BLVD**  
**JENSEN BEACH, FL 34957**

7. Name and Address of New Registered Agent  
 Name **Jack Sopher**  
 Street Address (P.O. Box Number is Not Acceptable)  
**773 Nettles Blvd.**  
 City **Jensen Beach FL** Zip Code **34957**

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 *Jack Sopher* **JACK SOPHER** DATE **4-18-06**

Signature typewritten printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	C BARLOW, TED 624 NETTLES BLVD JENSEN BEACH, FL 34957	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FC SALVATO, DOLORES 2088 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC SOPHER, JACK 773 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GILLETTE, CARLA 2063 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FINLAY, VALERIE 37 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RC O'CONNELL, HAROLD 2117 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jack Sopher 773 Nettles Blvd. Jensen Beach, FL 34957	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jim Killoran 50 Nettles Blvd Jensen Beach, FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Harold O'Connell 2117 Nettles Blvd Jensen Beach, FL 34957	<input checked="" 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	Dolores Salvato 2088 Nettles Blvd Jensen Beach, FL 34957	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: *Jack Sopher* **JACK SOPHER** DATE **4-18-06** DAYTIME PHONE # **772-229-3762**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR