


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 08:00 AM
Secretary of State

DOCUMENT # 756319 1. Entity Name NETTLES ISLAND YACHT CLUB, INC.	
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Principal Place of Business NETTLES ISLAND JENSEN BEACH, FL 34957 US	Mailing Address 773 NETTLES BLVD JENSEN BEACH, FL 34957 US
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03112007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2243889	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOPHER, JACK
773 NETTLES BLVD
JENSEN BEACH, FL 34957

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8. The above named entity admits 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 4/4/07
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, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE	C
NAME	SOPHER, JACK
STREET ADDRESS	773 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	FC
NAME	KILLORAN, JIM
STREET ADDRESS	50 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	VC
NAME	O'CONNELL, HAROLD
STREET ADDRESS	2117 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	S
NAME	GILLETTE, CARLA
STREET ADDRESS	2063 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	T
NAME	FINLAY, VALERIE
STREET ADDRESS	37 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	RC
NAME	SALVATO, DOLORES
STREET ADDRESS	2088 NETTLES BLVD
CITY-ST-ZIP	JENSEN BEACH, FL 34957

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04/18/07-80017-021 70.00

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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 4/4/07 772-229-3762
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #