


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90042 010 ****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 773 NETTLES BLVD JENSEN BEACH, FL 34957 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>2063 Nettles Blvd</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Jensen Beach, FL		03292008 Chg-NP CR2E037 (12/06)	
Zip 34957		4. FEI Number 59-2243889	
Country USA		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		7. Name and Address of New Registered Agent Name <i>Harold O'Connell</i> Street Address (P.O. Box Number is Not Acceptable) <i>2117 Nettles Blvd</i> City <i>Jensen Beach</i> FL Zip Code <i>34957</i>	
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 <i>Harold O'Connell</i>		Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		Make check payable to Florida Department of State	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SOPHER, JACK 773 NETTLES BLVD JENSEN BEACH, FL 34957	<input checked="" type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FC KILLORAN, JIM 50 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC O'CONNELL, HAROLD 2117 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RC SALVATO, DOLORES 2088 NETTLES BLVD JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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: <i>Harold O'Connell</i>		Signature, typed or printed name of signing officer or director. Date <i>4-11-08</i> Daytime Phone # <i>772-229-1368</i>	