

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90061 047 \*\*\*\*61.25

**DOCUMENT # 758850**

1. Entity Name  
**ADMIRALTY YACHT CLUB CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**15476 ADMIRALTY CR NE  
NORTH FT MYERS, FL 33917 US**

Mailing Address  
**GULF SHORES C.A.M.  
76 PONDELLA ROAD SUITE #201  
FORT MYERS, FL 33903 US**

40074228



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

59-2302729

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LAPOSTA, RICHARD  
GULF SHORES C.A.M.  
76 PONDELLA ROAD SUITE #201  
FORT MYERS, FL 33903**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☒ Delete  
NAME BOYARSKI, JENNIE  
STREET ADDRESS 15452-3 ADMIRALTY CIRCLE  
CITY-ST-ZIP FORT MYERS, FL 33917

TITLE ☐ Change ☒ Addition  
NAME **RICHARD BOYARSKI**  
STREET ADDRESS **15452-3 ADMIRALTY CIRCLE**  
CITY-ST-ZIP **N. FT. MYERS, FL 33917**

TITLE PD ☒ Delete  
NAME WOODS, ROBERT  
STREET ADDRESS 15485 #5 ADMIRALTY CIR  
CITY-ST-ZIP FORT MYERS, FL 33917

TITLE ☐ Change ☐ Addition  
NAME **LINDA HEATH**  
STREET ADDRESS **15488-1 ADMIRALTY CIRCLE**  
CITY-ST-ZIP **N. FT. MYERS, FL 33917**

TITLE VP ☐ Delete  
NAME SLACK, DICK  
STREET ADDRESS 15481-1 ADMIRALTY CIR  
CITY-ST-ZIP NORTH FORT MYERS, FL 33917

TITLE ☐ Change ☒ Addition  
NAME **JOSEPH SPIELMAN**  
STREET ADDRESS **15480 NELSONS WALK CT.**  
CITY-ST-ZIP **N. FT. MYERS, FL 33917**

TITLE TD ☐ Delete  
NAME STEFFENS, JOHN  
STREET ADDRESS 15485 #4 ADMIRALTY CIR  
CITY-ST-ZIP FORT MYERS, FL 33917

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME NIELSEN, JACK  
STREET ADDRESS 15444-9 ADMIRALTY CIRCLE  
CITY-ST-ZIP FORT MYERS, FL 33917

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**JOSEPH D SPIELMAN**

**PAR 4-18-07**

**239-543-4592**