


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 769453</b> 1. Entity Name WEST PALM BEACH FISHING CLUB, INC.	
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Principal Place of Business 201 FIFTH STREET P.O. BOX 468 W PALM BCH, FL 33402	Mailing Address 201 FIFTH STREET P.O. BOX 468 W PALM BCH, FL 33402
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**DO NOT WRITE IN THIS SPACE**



02022005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0058566	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

TWYFORD, THOMAS L., JR.  
 201 FIFTH STREET  
 W. PALM BEACH, FL 33402

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2005**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOLLEY, JOHN W., JR. 2233 GABRIEL LANE W. PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KLEISER, DANIEL R. 300 W. RIVERSIDE DR JUPITER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLOYD, THOMAS 400 EXECUTIVE CENTER DR. #105 WEST PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TWYFORD, THOMAS L., JR. 921 LAUREL RD N PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000218878  
 02/08/05-80006-009 61.25

**DO NOT WRITE IN THIS SPACE**

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.

*Thomas L. Wyford* 2-4-05 (561) 832-6780