

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90091 005 ****61.25

DOCUMENT # N02798

1. Entity Name
COCOANUT POINT YACHT CLUB, INC.



Principal Place of Business

PO BOX 220
STUART FL 34995
US

Mailing Address

P.O. BOX 220
STUART FL 34995
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2679040

Applied For

Not Applicable

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

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KUPFRIAN, WILBUR
1706 NW FORK RD
STUART FL 34994

Name

MACK, THOMAS, ESQ

Street Address (P.O. Box Number is Not Acceptable)

10044 S. OCEAN DR. #402

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 THOMAS MACK, ESQ

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 CD
NAME CARLSEN, ROY Delete
STREET ADDRESS 10044 S OCEAN DRIVE #702
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE CD
NAME PLASKET, LIZ Change Addition
STREET ADDRESS 3342 SE FAIRWAY WEST
CITY-ST-ZIP STUART, FL 34997

TITLE RD
NAME PLASKLEIT, LIZ Delete
STREET ADDRESS 3342 SE FAIRWAY W
CITY-ST-ZIP STUART FL 34497

TITLE RD
NAME COY, ROBERT Change Addition
STREET ADDRESS 1084 NW SPRUCE RIDGE DR.
CITY-ST-ZIP STUART, FL 34994

TITLE RD
NAME COY, ROBERT Delete
STREET ADDRESS 1084 NW SPRUCE RIDGE DR
CITY-ST-ZIP STUART FL 34994

TITLE RD
NAME STOOZZA, LARRY LA. Change Addition
STREET ADDRESS 1295 NW PINE LAKES DR
CITY-ST-ZIP STUART, FL 34994

TITLE TD
NAME MCGUIRE, MARY Delete
STREET ADDRESS 625 N RIVER DRIVE #202
CITY-ST-ZIP STUART FL 34994

TITLE TD
NAME MCGUIRE, MARY Change Addition
STREET ADDRESS 625 N. RIVER DR. #202
CITY-ST-ZIP STUART, FL 34994

TITLE SD
NAME RICHARDS, BETTE Delete
STREET ADDRESS 3081 SE ASTER LANE #104
CITY-ST-ZIP STUART FL 34994

TITLE SD
NAME RICHARDS, BETTE Change Addition
STREET ADDRESS 3081 SE ASTER LN #104
CITY-ST-ZIP STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

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.

SIGNATURE: Bette Richards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-03 (772) 288-4949
Date Davima Phone #

CR2E037 (10/02)