

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001130

FILED  
Jan 20, 2005  
Secretary of State

Entity Name: THE LIMES DOCK CLUB, INC.

**Current Principal Place of Business:**

341 WEST VENICE AVENUE  
VENICE, FL 34285

**New Principal Place of Business:**

**Current Mailing Address:**

341 WEST VENICE AVE  
VENICE, FL 34285

**New Mailing Address:**

FEI Number: 59-1366405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KLINGBEIL, ROBERT T JR  
341 W. VENICE AVENUE  
VENICE, FL 34285 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHRECKER, CARL  
Address: 1508 BAYSHORE RD.  
City-St-Zip: NOKOMIS, FL 34275

Title: V ( ) Delete  
Name: MYER, ALAN  
Address: 316 CITRUS  
City-St-Zip: NOKOMIS, FL 34275

Title: T ( ) Delete  
Name: D'AUTO, RAY  
Address: 416 LIME DRIVE  
City-St-Zip: NOKOMIS, FL 34275

Title: S ( ) Delete  
Name: SAUNDERS, SCOTT  
Address: 400 LIME DRIVE  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAY D'AUTO

T

01/20/2005

Electronic Signature of Signing Officer or Director

Date