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Mar 26 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04179 (0)

1. Corporation Name

ST. PETE SAILING CLUB, INCORPORATED

Principal Place of Business

%MILLIE NASTA
1920 SANDRA DR
CLEARWATER FL 34624
US

Mailing Address

% MILLIE NASTA
1920 SANDRA DR
CLEARWATER FL 34624-4772
US3. Date Incorporated or Qualified
07/13/19843a. Date of Last Report
03/21/1996

2. Principal Place of Business

21 To Philip Bellefleur
Suite, Apt. #, etc.22 9782 Pine Lake Trail
City & State

23 St. Petersburg FL

24 33708 Country
25 U.S.A.

2a. Mailing Address

26 To Dotty Wolksi
Suite, Apt. #, etc.27 4517 Orangewood Lp. W.
City & State

28 Lakeland FL

29 33813 Country
30 USA

4. FEI Number

59-2953444

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

NASTA, MILLIE
1920 SANDRA DRIVE
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name

Dotty Wolksi

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

4517 Orangewood Loop W.

83

84 City

Lakeland

FL

85 Zip Code

33813

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Dorothy L. Wolksi

Feb 18, 1997

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP
PO D
BONDS, CHARLIE
503 150TH AVE SLP 7
MADEIRA BEACH FL 33708

DELETE

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP
VD
REDMAN, ROBER
11378 HARBORSIDE DR
LARGO FL 34643

DELETE

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP
SD
NASTA, MILLIE
1920 SANDRA DR
CLEARWATER FL 34624

DELETE

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
LEDER, LEWIS
3434 4TH AVE N
ST. PETERSBURG FL 33713

DELETE

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

Change Addition

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dorothy L. Wolksi

Date

2/18/97

Daytime Phone # 0067813

CR2E037 (9/96)