

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12463

FILED
Jan 20, 2009
Secretary of State

Entity Name: ROYAL PALM SAILING CLUB, INC.

Current Principal Place of Business:

3594 BROADWAY
FT MYERS, FL 33901

New Principal Place of Business:

15880 SUMMERLIN RD
#300-175
FT MYERS, FL 33908

Current Mailing Address:

3594 BROADWAY
FT MYERS, FL 33901

New Mailing Address:

15880 SUMMERLIN RD
#300-175
FT MYERS, FL 33908

FEI Number: 59-2635134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBB, MILAM ROSS
3594 BROADWAY
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

WEBB, MILAM R
18356 DEEP PASSAGE LANE
FT MYERS BEACH, FL 33931 US

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: MILAM ROSS WEBB

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEBB, MILAM ROSS,
Address: 3594 BROADWAY
City-St-Zip: FT.MYERS, FL

Title: TD () Delete
Name: D'ALESSANDRO, PETE
Address: 9816 CAPSTAN COURT
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: WEBB, STEPHANIE,
Address: 3594 BROADWAY
City-St-Zip: FT.MYERS, FL

Title: VD () Delete
Name: LAWRENCE, C. RICHARD
Address: 1813 EVERST PKWY
City-St-Zip: CAPE CORAL, FL 33904

Title: D (X) Delete
Name: OLIVE, STEVE
Address: 127 FORSYTH DR
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEBB, MILAM ROSS,
Address: 18356 DEEP PASSAGE LANE
City-St-Zip: FT.MYERS BEACH, FL 33931 US

Title: VPD (X) Change () Addition
Name: OLIVE, STEVE
Address: 1271 FORSYTH DR
City-St-Zip: N FORT MYERS, FL 33903 US

Title: SD (X) Change () Addition
Name: WEBB, STEPHANIE,
Address: 18356 DEEP PASSAGE LANE
City-St-Zip: FT.MYERS BEACH, FL 33931 US

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 exemption stated 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 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: MILAM ROSS WEBB

PD

01/20/2009

Electronic Signature of Signing Officer or Director

Date