

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N25760** (2)

1. Corporation Name

FORT MYERS BEACH YACHT CLUB, INC.



Principal Place of Business

**137 MADISON ST
PO BOX 6416
FT MYERS FL 33932
US**

Mailing Address

**137 MADISON ST
PO BOX 6416
FT. MYERS BEACH FL 33932
US**

3. Date Incorporated or Qualified
04/05/1988

3a. Date of Last Report
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **4116 S.E. 20th PLACE**

26 **4116 S.E. 20th PL. # 101**

4. FEI Number
65-0101799

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **UNIT #101**

27 **CAPE CORAL, FL 33904**

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

City & State

City & State

23 **CAPE CORAL, FL**

28 **33904-8029**

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

Zip

Country

Zip

Country

24 **33904**

25 **USA**

29

30 **USA**

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JACOBY, ROBERT E
137 MADISON ST
PO BOX 6416
FT. MYERS BEACH FL 33932**

81 Name

ALFRED A. EDEN

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

4116 S.E. 20th PLACE

83

APT #101

84 City

CAPE CORAL

FL

85 Zip Code

33904

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 **ALFRED A. EDEN, T.D.**

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

Alfred A. Eden

(NOTE: Registered Agent signature required when reinstating)

2/21/96

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☐ DELETE
NAME **ROSENSTRAUCH, AL**
STREET ADDRESS **4230 SE 20TH PL, #107**
CITY-ST-ZIP **CAPE CORAL FL**

1.1 TITLE

☐ Change ☐ Addition

TITLE **CD** ☐ DELETE
NAME **LEE, CLIFFORD**
STREET ADDRESS **894 BUTTONWOOD, #115**
CITY-ST-ZIP **FT MYERS BEACH FL**

1.2 NAME

☐ Change ☐ Addition

TITLE **PCD** ☒ DELETE
NAME **GROSS, JOHN**
STREET ADDRESS **17340 SAN CARLOS BLVD**
CITY-ST-ZIP **FT. MYERS BCH FL**

1.3 STREET ADDRESS

☐ Change ☐ Addition

TITLE **SD** ☒ DELETE
NAME **MILLER, CONNIE**
STREET ADDRESS **4521 BAY BEACH LANE**
CITY-ST-ZIP **FT. MYERS BCH FL**

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **TD** ☒ DELETE
NAME **JACOBY, ROBERT**
STREET ADDRESS **137 MADISON ST.**
CITY-ST-ZIP **FT. MYERS BCH FL**

2.1 TITLE

☐ Change ☐ Addition

TITLE **D** ☒ DELETE
NAME **KOLAR, TOM**
STREET ADDRESS **916 SAN CARLOS DR.**
CITY-ST-ZIP **FT MYERS BEACH FL**

2.2 NAME

☐ Change ☐ Addition

2.3 STREET ADDRESS

☐ Change ☐ Addition

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

☒ Change ☐ Addition

3.2 NAME

☐ Change ☐ Addition

3.3 STREET ADDRESS

☐ Change ☐ Addition

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

☒ Change ☐ Addition

4.2 NAME

☐ Change ☐ Addition

4.3 STREET ADDRESS

☐ Change ☐ Addition

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

☒ Change ☐ Addition

5.2 NAME

☐ Change ☐ Addition

5.3 STREET ADDRESS

☐ Change ☐ Addition

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

☒ Change ☐ Addition

6.2 NAME

☐ Change ☐ Addition

6.3 STREET ADDRESS

☐ Change ☐ Addition

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Alfred A. Eden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96

Date

(941) 549-6017

Daytime Phone #

CR2E037 (12/95)