2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 11, 2002 8:00 am § Secretary of State **DOCUMENT # N25760** 1. Entity Name FORT MYERS BEACH YACHT CLUB, INC. 02-11-2002 90210 022 ****61.25 Principal Place of Business Mailing Address 4116 SE 20TH PLACE 4116 SE 20TH PLACE UNIT-1013-7 CAPE CORAL FL 33904 CAPE CORAL FL 33904-8029 US. 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0101799 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) EDEN, ALFRED A. 4116 SE 20TH PLACE #101 Zip Code PAPE CORAL FL 33904 FL 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Addition Change Delete TITLE TITLE VOSSMAN, WH. MILLER, CONNIE NAME 3347 SE 37# TER STREET ADDRESS STREET ADDRESS 4521 BAY BEACH LN CAPE CORAL, FL 23904 CITY-ST-ZIP CITY-ST-ZIP FT MYERS BEACH FL 33931 Change Addition CD Delete TITLE TITLE SHORT RICHARD 9369 GARDEN POINT CT BOTTARI, DOMINIC NAME NAME STREET ADDRESS STREET ADDRESS 18499 DEEP PASSAGE LE CITY-ST-ZIP CITY-ST-ZIP FT MYERS BCH FL 33904 FORT MYERS, FL.33908 Change Delete Addition TITLE Bronston, MELVIN NAME ANDERSON, JOHN NAME 4240 SE 2DTHPLACE #112 STREET ADDRESS STREET ADDRESS 43 FAIRVIEW BLVD CITY-ST-7IP APE CORAL, FL 33904 CITY-ST-ZIP FT MYERS BEACH FL 33931 Change Addition **⊠** Delete TITLE TITLE GOODMAN, PEGGY SALING, VICTORIA NAME NAME STREET ADDRESS 18022 SAN CARLOS BLVD 67 STREET ADDRESS 11153 BOARDWALK PL CITY-ST-7IP CITY-ST-ZIP FT. MYERS, FL 33908 FT MYERS BCH FL ☐ Change Addition ☐ Delete TITLE TITLE NAME EDEN, ALFRED A. NAME STREET ADDRESS STREET ADDRESS 4116 SE 20TH PLACE #101 CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL PJ Change Addition ☐ Delete TITLE TITLE NAME HARRISON, M.D. HOWARD NAME STREET ADDRESS STREET ADDRESS 4244 SE 20TH PL #319

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.

CITY-ST-ZIP

SIGNATURE:

CAPE CORAL FL

CITY-ST-7IP