FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N36242** **(8)**

1. Corporation Name

GULF BREEZE YACHT CLUB, INC.

Principal Place of Business	Mailing Address
976 GRAND CANAL GULF BREEZE FL 32561 US	976 GRAND CANAL GULF BREEZE FL 32561 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/19/1990
3a. Date of Last Report: 07/26/1994
4. FEI Number: 59-2989873 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 974 Grand Canal	26 Same
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Gulf Breeze FL.	City & State 28
Zip / Country 24 32561 / 25 Santa Rosa	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

HEFTY, JOHN
976 GRAND CANAL
GULF BREEZE FL 32561

10. Name and Address of New Registered Agent

81 Name: Anne Bergan
82 Street Address (P.O. Box Number is Not Acceptable):
83: 974 Grand Canal
84 City: Gulf Breeze Fl. FL 85 Zip Code: 32561

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Anne Bergan 4/19/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	11 TITLE	Commodore D	☒ Change ☐ Addition
NAME	HEFTY, JOHN	12 NAME	ANNE Bergan	
STREET ADDRESS	976 GRAND CANAL	13 STREET ADDRESS	974 Grand Canal	
CITY-ST-ZIP	GULF BREEZE FL	14 CITY-ST-ZIP	Gulf Breeze Fl. 32561	
TITLE	D	21 TITLE	Vice Com. D	☒ Change ☐ Addition
NAME	BERGAN, ANN	22 NAME	Jack Handy	
STREET ADDRESS	974 GRAND CANAL	23 STREET ADDRESS	3893 Paradise Bay Drive	
CITY-ST-ZIP	GULF BREEZE FL	24 CITY-ST-ZIP	Gulf Breeze Fl. 32561	
TITLE	D.	31 TITLE	Rear Comm. D	☒ Change ☐ Addition
NAME	WENRICK, JOHN	32 NAME	JOHN HEFTY	
STREET ADDRESS	6443 AVENIDA DE GALVES	33 STREET ADDRESS	976 GRAND CANAL ST	
CITY-ST-ZIP	NAVARRE FL	34 CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	DT	41 TITLE	Treas D	☐ Change ☐ Addition
NAME	SMITH, MELVIN R OY	42 NAME	Melvin R. Smith	
STREET ADDRESS	1604 BATAAN LN	43 STREET ADDRESS	1604 Bataan Ln	
CITY-ST-ZIP	GULF BREEZE FL 32561	44 CITY-ST-ZIP	Gulf Breeze Fl. 32561	
TITLE	SD	51 TITLE	Secretary D	☒ Change ☐ Addition
NAME	MULLER, LOIS	52 NAME	Charles Anderson	
STREET ADDRESS	1079 SEABREEZE LN.	53 STREET ADDRESS	2961 Coral Strip Parkway	
CITY-ST-ZIP	GULF BREEZE FL	54 CITY-ST-ZIP	Gulf Breeze Fl. 32561	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(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: Melvin Ray Smith 4-1-95 904-932-3944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

007B110