## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N95000001522 (0)

SHELL KEY BOAT CLUB, INCORPORATED

SHELL RET BOAT GEOD, INCOMPONATED											
Principal Place of Business Mailing Address											
3706 BELLE VISTA DR E ST PETE BEACH FL 33706 ST PETE BEACH FL 33706 ST PETE BEACH FL 33706			;				3. Date Incorporated or Qualified 03/29/1995	· <del></del>		· <u>·</u> · ·	
								4. FEI Number NOT APPLICABLE			pplied For lot Applicable
	Place of Business		Mailing Address					5. Certificate of Status Desired	П	<del></del>	Additional
21 Suite, Apt.	. #. etc.	26	Suite, Apt. #, etc.					6. Election Campaign Financing			lequired
22		27	27					Trust Fund Contribution		OU.CC Added t	May Be to Fees
City & Stal	te	—	City & State					7. Is this nonprofit corporation a ho			on?
Zip	Country	28	(ip	Cour	ntry			8. This corporation owes or has pai	Yes 🔼		unaikle
24	25	29	<u> </u>	30				Personal Property Tax due June			No .
	9. Name and Address of Curre	nt Registe	Registered Agent				10. Name and Address of New Registered Agent				
MUTAN	ITH OLENA				81	Name					
WIRTANEN, GLEN M 3706 BELLE VISTA DR E			Ī	82	Street A	ddress (P.O. Box Number is Not Acceptable)					
	E BEACH FL 33706										·
				-	84	City			FI <sup>8</sup>	35 Zip	Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617	.1508, Florida Statut	es, the ab	ove	-named c	orpora	ation submits this statement for the pr		anging i	ts registered
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											
					agistered Agent signature required when reinstating) DATE						
TITLE	VPD OFFICERS AN	ID DIRECT	ORS DELETE	13.	-		7777	ADDITIONS/CHANGES TO OFFICE		RECTOF Change	
NAME	TOUZEAU, ROBERT		L. Dittie		1.1 TITLE 1.2 NAME		VPI		2	Unange	Addition
STREET ADDRESS	1475 46TH AVE., N.E.							zeau, Robert			
CITY-ST-ZIP	ST PETERSBURG FL							) Blind Pass Road Pete Beach, FL			
TITLE	PD		DELETE		1.4 CITY-ST-ZIP 2.1 TITLE		D.	rece beach, FL	<b>S</b>	Change	Addition
NAME	VELTON, RONALD		<del>_</del>		2.2 NAME		_	tton Domold		onungo	
STREET ADDRESS	572 ULLIAN DRIVE					ADDRESS		ton, Ronald			
CITY-ST-ZIP	MADEIRA BEACH FL				J			Lillian Drive Leira Beach, FL			
TITLE	SD		DELETE	3.1 TITL		-	SD	terra beach, FL	×	Change	Addition
NAME	HAYNIE, SUE			3.2 NAN	ΛE	وا		ıt, Heidi	_	. 3.	
STREET ADDRESS	273 HERMOSITA DRIVE			3.3 STR	EET A			Dover Street NE			
CITY-ST-ZIP	ST PETERSBURG BEACH FL			3.4. CIT	Y-ST			Petersburg, FL			
TITLE	TD	***	☐ DELETE	4,1 TITL	E		TD		×	Change	☐ Addition
NAME	Weir, Ian			4, 2 NA!	ME	ls	Sine	leton, Stephen			
STREET ADDRESS	312 8TH AVE N #21			4.3 STR	EET A		-	7th Street N			
CITY-ST-ZIP	TIERRA VERDE FL			4.4 CITY	/-ST-	I .		Petersburg, FL			ļ
TITLE	CD		DELETE	5.1 TiTL	E		PD		×	Change	☐ Addition
NAME	MIDDLETON, DAVID			5.2 NAM	ΙE	s	avu	ıt, John			
STREET ADDRESS	1120 PINELLAS BAYWAY SUI	TE 203		5.3 STR	EET A			Dover Street NE			
CITY-ST-ZIP	TIERRA VERDE FL			5.4 CITY	-ST-	ZIP S	t.	Petersburg, FL			
TITLE	D		☐ DELETE	6.1 TITL	Ę					Change	Addition
NAME	WIRTANEN, GLEN			6.2 NAM	Œ						ļ
STREET ADDRESS	3706 BELLE VISTA DRIVE EA	ST		6.3 STRE	EET A	DDRESS					

14. 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 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 of 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 in an attachment with an address. SIGNATURE:

**FILED** 

Feb 02 1998 8:00am

Secretary of State

1/13/98