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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

98 APR 23 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #P96000095387
1. Corporation Name
Shell Point Yacht Club, Inc.

Principal Place of Business Mailing Address
1661 Estero Blvd., Suite #9
Ft. Myers Beach, FL 33931

REINSTATEMENT 97-98

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/26/96		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number Applied for		☒ Applied For ☐ Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. 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			
				81	Name Leonard J. Lucas		
				82	Street Address (P.O. Box Number is Not Acceptable) 1661 Estero Blvd., Suite #9		
				83			
				84	City	Ft. Myers Beach	FL
							85 Zip Code 33931

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 publication of, Section 607.0505, Florida Statutes.

SIGNATURE: *Leonard J. Lucas* Pres. 4/21/98
(Not a Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
☐ DELETE				☐ Change ☐ Addition			
TITLE	Pres., Director			11	NAME		
NAME	Leonard J. Lucas			12	NAME		
STREET ADDRESS	3728 Liberty Sq.			13	STREET ADDRESS		
CITY-STATE-ZIP	Ft. Myers, FL 33908			14	CITY-STATE-ZIP		
TITLE	Vice Pres, Director			21	NAME		
NAME	Kent Stonner			22	NAME		
STREET ADDRESS	102 East Oak			23	STREET ADDRESS		
CITY-STATE-ZIP	Mahomet, IL 61853			24	CITY-STATE-ZIP		
☐ DELETE				31	NAME		
NAME	Director E. Stonner			32	NAME		
STREET ADDRESS	1912 Byrnebruk Drive			33	STREET ADDRESS		
CITY-STATE-ZIP	Champaign, IL 61821			34	CITY-STATE-ZIP		
☐ DELETE				41	NAME		
TITLE				42	NAME		
NAME				43	STREET ADDRESS		
STREET ADDRESS				44	CITY-STATE-ZIP		
CITY-STATE-ZIP				51	NAME		
☐ DELETE				52	NAME		
TITLE				53	STREET ADDRESS		
NAME				54	CITY-STATE-ZIP		
STREET ADDRESS				61	NAME		
CITY-STATE-ZIP				62	NAME		
☐ DELETE				63	STREET ADDRESS		
TITLE				64	CITY-STATE-ZIP		
NAME							
STREET ADDRESS							
CITY-STATE-ZIP							

14. I do hereby certify that the information supplied with this form 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Leonard J. Lucas* Pres. 4/21/98 941-463-4444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)