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PROFIT CORPORATION ANNUAL REPORT

1998



ELOBIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000031055 (1)

GULF HARBOUR YACHT CLUB, INC.

Principal Place of Business Mailing Address 14490 VISTA RIVER DRIVE 14490 VISTA RIVER DRIVE FORT MYERS FL 33908 FORT MYERS FL 33908

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/04/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0749473 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zio Country 8. This corporation owes or has paid the current year Intangible Yes LEE LER 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SIMON, THOMAS R 14490 VISTA RIVER DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33908 **B3** 84 City 85 Zip Code 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 Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change ☐ Addition TITLE DELETE 1.1 TITLE TREASUNEL SMON, THOMAS R SIMON, Thomas R. 12384 Kelly SANDS WAY NAME 1.2 NAME 12384 KELLY SANDS WAY STREET ADDRESS 1.3 STREET ADDRESS FORT MYERS FL 33908 FT. MYERS FL. 33908 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE COMMODORE EDELMAN, GAIL 22 NAME NAME KNISKERN, PHIL 11460 OSPREY LANDING WAY STREET ADDRESS 2.3 STREET ADDRESS 11211 COMPASS POINT DRIVE FORT MYERS FL 33908 ET. MYERS, FL 33908-4940 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE VICE COMMODONE RANDACL, HARRY WILLIAMS, ART 3.2 NAME NAME 12390 COCOUNT CREEK 11460 OSPREY LANDING WAY STREET ADDRESS 3.3 STREET ADDRESS FORT MYERS FL 33908 FT. MYELS, FL. 33908 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition SER RET ANY LANGBERG, GERALD 14350-A HARBOUR LANDINGS NAME RANDALL, HARRY 4. 2 NAME DA. STREET ADDRESS 14356-A HARBOUR LANDINGS DRIVE 4.3 STREET ADDRESS 33908 FORT MYERS FL 33908 FT. MYERS, FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE DILECTOR KNISKERN, PHIL PFEIFFER, VICTOR NAME 5.2 NAME 14358-C HARBOUR LANDINGS DR. 14346-C HARBOR LANDINGS DRIVE 5.3 STREET ADDRESS STREET ADDRESS FT. MYENS, FL 33908-7910 FORT MYERS FL 33908 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE Dinneron FIORE, LOUIS NAME 6.2 NAME DECENOVA, AL 15110 ANCHORAGE WAY STREET ADDRESS 6.3 STREET ADDRESS 12341 KELLY SANDS WAY

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 suppriormental annual report is frue and accurate and that my signature shall have the same logal 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.

Quil House 1 21.99