

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703135

Entity Name: ORMOND YACHT CLUB, INC.

Current Principal Place of Business:

63 N. BEACH ST.
ORMOND BEACH, FL 32174-5601

Current Mailing Address:

P.O. BOX 1524
ORMOND BEACH, FL 32175 US

FEI Number: 30-0530369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLAHAN, KEVIN
2887 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176 US

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: KEVIN CALLAHAN

02/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SNELL, GREGORY
Address P.O. BOX 1524
City-State-Zip: ORMOND BEACH FL 32175

Title DIRECTOR
Name DIEFENDERFER, FRANK
Address 518 N. INDIAN RIVER RD.
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name PARTINGTON, WILLIAM E II
Address 4 PINE VALLEY CIRCLE
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name JAMES, BUCKLEY
Address P.O. BOX 1524
City-State-Zip: ORMOND BEACH FL 32175

Title VP
Name FREDERICK, SCOTT
Address P.O. BOX 1524
City-State-Zip: ORMOND BEACH FL 32175

Title SECRETARY
Name CLARK, ELIZABETH
Address P.O. BOX 1524
City-State-Zip: ORMOND BEACH FL 32175

Title TREASURER
Name KALER, BILLIE JO J
Address P.O. BOX 1524
City-State-Zip: ORMOND BEACH FL 32175

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BILLIE JO J KALER

TREASURER

02/28/2024

Electronic Signature of Signing Officer/Director Detail

Date