

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 22, 2005 08:00 AM
Secretary of State

DOCUMENT # 716219

1. Entity Name
BISCAYNE BAY YACHT CLUB



Principal Place of Business
**2540 SOUTH BAYSHORE DR
MIAMI, FL 33133 US**

Mailing Address
**2540 SOUTH BAYSHORE DR
MIAMI, FL 33133 US**



01062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-0165090** Applied For
Not Applied
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HECTOR, ROBERT C JR
2540 S BAYSHORE DRIVE
MIAMI, FL 33133**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert C Hektor
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE
1-2-05

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRUITT, PETER T JR 6520 SW 131 STREET PINECREST, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KENDALL, HAROLD E JR 1638 SOUTH BAYSHORE COURT COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HECTOR, ROBERT C JR 6001 GRANADA BLVD CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WARREN, QUILLIAN W 6901 CANAMIN ST CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MATHESON, BRUCE 2540 S BAYSHORE DR MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1000000191392
01/24/05-80171-013 61.25

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Warren Quillian W

WARREN QUILLIAN W

Comm.

1/11/05