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Hinkle & Richter, CPA's

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90308 040 ****61.25

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 726906					
1. Entity Name SEA HAVEN YACHT CLUB, INC.					
Principal Place of Business 2731 N.E. 14TH ST. CAUSEWAY POMPAN0 BEACH, FL 33062		Mailing Address 2731 N.E. 14TH ST. CAUSEWAY POMPAN0 BEACH, FL 33062			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Country	
4. FEI Number 65-0276199		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
COOLBAUGH, LOUISE 2731 N.E. 14TH ST CAUSEWAY POMPAN0 BEACH, FL 33062			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 <i>Louise Coolbaugh</i>		(NOTE: Registered Agent signature required when reinstating)		DATE 4-24-04	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEUMEYER, PAT 2731 NE 14 ST. CSWY #836 POMPAN0 BEACH, FL 33062	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WALLY DROSSIN 2731 NE 14 ST. # 732 Pompano Beach, FL 33062	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CREIGHTON, BARRY 2731 14 ST. CSWY #434 POMPAN0 BEACH, FL 33062	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RON JONES 2731 NE 14 ST. # 503 Pompano Beach FL 33062	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC GELSOMINO, ROSE 2731 N.E. 14 ST CSWY #536 POMPAN0 BEACH, FL 33062	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COOLBAUGH, LOUISE 2731 NE 14 ST. POMPAN0 BEACH, FL 33062	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM DEROSA, JUDD 2731 NE 14 ST CSWY POMPAN0 BEACH, FL 33062	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASELLI, JOE 2731 NE 14 ST. CSWY #718 POMPAN0 BEACH, FL 33062	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 <i>Louise Coolbaugh</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR LOUISE COOLBAUGH		DATE 4-24-04 Daytime Phone # 954-942-2697	

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