


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # 726906 1. Entity Name SEA HAVEN YACHT CLUB, INC.	
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Principal Place of Business 2731 N.E. 14TH ST. CAUSEWAY POMPANO BEACH, FL 33062	Mailing Address 2731 N.E. 14TH ST. CAUSEWAY POMPANO BEACH, FL 33062
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DO NOT WRITE IN THIS SPACE



04202007 No Chg-NP CR2E037 (4/08)

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

**COOLBAUGH, LOUISE
2731 N.E. 14TH ST CAUSEWAY
POMPANO BEACH, FL 33062**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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

000000730588
05/08/07-80086-007 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PETRI, JOHN 2731 NE 14TH ST #235 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C DAVIS, WILLIAM 2731 NE 14 ST, # 618 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MATTIOLI, TOM 2731 NE 14TH ST #803 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COOLBAUGH, LOUISE 2731 NE 14 ST, 809 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM O'BERRY, JIM 2731 NE 14 ST, # 514 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASELLI, JOE 2731 NE 14 ST. CSWY #718 POMPANO BEACH, FL 33062

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Louise Coolbaugh* **4/23/07** **954-942-2697**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
LOUISE COOLBAUGH