

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 756449		
1. Entity Name BONEFISH YACHT CLUB HOMEOWNERS ASSOCIATION, INC.		

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 11 PM 1:09

Principal Place of Business 95 COCO PLUM DRIVE MARATHON, FL 33050	Mailing Address PO BOX 510792 KEY COLONY BEACH, FL 33051
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04182008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2079380		Applied For ☐	Not Applicable ☒
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SVENDSEN, RENEE 530 10TH STREET KEY COLONY BEACH, FL 33051		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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SWATIK, DONALD 25 GRACE AVE SUTTON, MA 01590 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP 700131282547 06/13/08--01025--011 **\$61.25 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HASTINGS, ROBERT PO BOX 2145 YORKTOWN, VA 23962 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS ORTH, WILLIAM 95 COCO PLUM DR #4B MARATHON, FL 33050 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT ROMINE, PAUL 10165 E 121 ST FISHERS, IN 46038 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT VP ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARGIOTTA, MARK 95 COCO PLUM DR #4A MARATHON, FL 33050 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Lagan Blackburn 8210 Red Bud W. Lane Indianapolis IN 46256 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	B 6/11/08 ☐ Change ☐ Addition

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 lines empowered.

SIGNATURE: William Orth **William Orth 5/1/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #