


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90062 037 ****61.25

DOCUMENT # 759564					
1. Entity Name THE FLAGLER YACHT CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3700 GEORGIA AVE WEST PALM BEACH, FL 33405 US			Mailing Address 3307 NORTH LAKE BLVD STE 107 WEST PALM BEACH, FL 33403 US		
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	04022007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-2149025				<input type="checkbox"/> Applied For <input type="checkbox"/> 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		
LEWIS, WILLIAM COMPLETE PROP MGMT 3307 NORTH LAKE BLVD STE 107 WEST PALM BEACH, FL 33403			Name <u>Phoenix Management Services</u> Street Address (P.O. Box Number is Not Acceptable) <u>3082 Jog Road,</u> City <u>Lake Worth</u> FL Zip Code <u>33467</u>		
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 <u>Don C. Routhal</u>			DATE <u>4-11-07</u>		
Signature, typed or printed name of registered agent and title if applicable. (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. <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	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MARJORY, AARON	NAME			
STREET ADDRESS	3701 S FLAGLER DR B307	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33405	CITY-ST-ZIP			
TITLE	DS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GILLICK, SHARON	NAME			
STREET ADDRESS	3701 S FLAGLER DR B403	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33405	CITY-ST-ZIP			
TITLE	DVP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SPRINGHORN, KATHLEEN	NAME			
STREET ADDRESS	3701 S FLAGLER DR B106	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33405	CITY-ST-ZIP			
TITLE	DT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RAICH, NICHOLAS JR	NAME			
STREET ADDRESS	3701 S FLAGLER DR B203	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33405	CITY-ST-ZIP			
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TRAHAN, SAHIR CY	NAME			
STREET ADDRESS	3701 S FLAGLER DRIVE B107	STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH, FL 33405	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			



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 the information of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, has not been changed, or on an attachment with an address, with all other like empowered