

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001764

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: RAT ISLAND YACHT CLUB, INC.

**Current Principal Place of Business:**

136 CEDAR STREET  
SAN MATEO, FL 32187

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1053  
SAN MATEO, FL 32187

**New Mailing Address:**

FEI Number: 59-3645279

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARRACLOUGH, KEVIN  
136 CEDAR STREET  
SAN MATEO, FL 32187 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: BARRACLOUGH, KEVIN  
Address: 136 CEDAR STREET  
City-St-Zip: SAN MATEO, FL 32187

Title: S ( ) Delete  
Name: KIGHT, CONNIE  
Address: PO BOX 755  
City-St-Zip: SAN MATEO, FL 32187

Title: VCD ( ) Delete  
Name: ASHLEY, RICHARD  
Address: 207 GOODWIN ST  
City-St-Zip: E. PALATKA, FL 32131

Title: T ( ) Delete  
Name: BURNHAM, DAVID  
Address: 101 RIVERVIEW DRIVE  
City-St-Zip: EAST PALATKA, FL 32131

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID BURNHAM

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01/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date