

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03247

FILED
Jul 01, 2009
Secretary of State

Entity Name: YACHT HARBOUR VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3200 N. OCEAN DRIVE
HOLLYWOOD, FL 33019

New Principal Place of Business:

C/O ABSOLUTE PROPERTY MANAGEMENT, INC.
541 S STATE ROAD 7, SUITE 12
MARGATE, FL 33068

Current Mailing Address:

3200 N. OCEAN DRIVE
HOLLYWOOD, FL 33019

New Mailing Address:

C/O ABSOLUTE PROPERTY MANAGEMENT, INC.
541 S STATE ROAD 7, SUITE 12
MARGATE, FL 33068

FEI Number: 59-2779512 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SUGAR, EDMUND L ESQ.
950 SOUTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020 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: D () Delete
Name: VLESMAS, EUGENIA
Address: 3200 N OCEAN DR, # 404
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: MONTESI, MICHAEL
Address: 3200 N OCEAN DR, # 206
City-St-Zip: HOLLYWOOD, FL 33019

Title: DP () Delete
Name: KELLER, JOHN
Address: 3200 N OCEAN DRIVE # 205
City-St-Zip: HOLLYWOOD, FL 33019

Title: TS () Delete
Name: BALDOVINI, MARY
Address: 3200 N OCEAN DR, # 502
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: DE LEON, BELLINDA
Address: 3200 N OCEAN DR, #205
City-St-Zip: HOLLYWOOD, FL 33019

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KELLER, JOHN
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

Title: DVP (X) Change () Addition
Name: VALLETTI, SAM
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

Title: DT (X) Change () Addition
Name: BALDONVINI, MARY
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

Title: D (X) Change () Addition
Name: BEAUREGARD, ANGELA
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

Title: D (X) Change () Addition
Name: LABARBERA, SALVATORE
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

Title: D () Change (X) Addition
Name: MACDONALD, BERNARD
Address: 541 S STATE ROAD 7, SUITE 12
City-St-Zip: MARGATE, FL 33068

I hereby certify that the information supplied with this filing does not qualify 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: JONATHAN LOUIS

MGR

07/01/2009

Electronic Signature of Signing Officer or Director

Date