2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2005 08:00 AM
Secretary of State

DOCUMENT # N03247

1. Entity Name
YACHT HARBOUR VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3200 N. OCEAN DRIVE HOLLYWOOD, FL 33019	3200 N. OCEAN DRIVE HOLLYWOOD, FL 33019

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01312005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2779512
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SUGAR, EDMUND L ESQ.
950 SOUTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

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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 _____ DATE
(Signature, type or print name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating.)

Filing Fee is $61.25
Due by May 1, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	TD
NAME	BALDWIN, LOU
STREET ADDRESS	3200 N OCEAN DR #502
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	D
NAME	SIMMONS, SAM
STREET ADDRESS	3200 N OCEAN DRIVE # 102
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	SD
NAME	VALLETTI, SAM
STREET ADDRESS	3200 N OCEAN DR #403
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	VD
NAME	SIMMONS, SAM
STREET ADDRESS	3200 N OCEAN DR #102
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	DP
NAME	KELLER, JOHN
STREET ADDRESS	3200 N OCEAN DRIVE # 205
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000216620
02/05/05-80056-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: John C Keller Feb 2, 2005 954-924-3412
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #