2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007
Secretary of State

DOCUMENT# 700835

Entity Name: THE SAILFISH CLUB OF FLORIDA, INC.

Current Principal Place of Business:

1338 N. LAKE WAY
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

1338 N. LAKE WAY
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-0432073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWMAN, JOHN
% SAILFISH CLUB OF FLORIDA
1338 N. LAKE WAY
PALM BEACH, FL 33480 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:	TD	( ) Delete
Name:	CALER, WILLIAM K	
Address:	234 DYER ROAD	
City-St-Zip:	WEST PALM BEACH, FL 33405	
Title:	VPD	( ) Delete
Name:	JOHNSON, JR., RICHARD	
Address:	1706 NORTH LAKESIDE DRIVE	
City-St-Zip:	LAKE WORTH, FL 33460	
Title:	PD	( ) Delete
Name:	COOK, MARK	
Address:	340 ROYAL PALM WAY, STE 101	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	SD	( ) Delete
Name:	MC CRACKEN, JOHN	
Address:	245 BARTON AVENUE	
City-St-Zip:	PALM BEACH, FL 33480	

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: JEAN DAME CONT 03/15/2007

Electronic Signature of Signing Officer or Director — Date