

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # N05000006311**

1. Entity Name

DANIA BEACH BOAT CLUB CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business

90 NORTH BRYAN ROAD  
DANIA BEACH, FL 33004

Mailing Address

90 NORTH BRYAN ROAD  
DANIA BEACH, FL 33004

**DO NOT WRITE IN THIS SPACE**



01082008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

20-3507867

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MOGERMAN, RICHARD M  
150 SOUTH PINE ISLAND ROAD STE 300  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	DVS
NAME	MERCER, LEONARD J JR
STREET ADDRESS	11817 MAIDSTONE DRIVE
CITY - ST - ZIP	WELLINGTON, FL 33414
TITLE	DPT
NAME	LALLY, MICHAEL M
STREET ADDRESS	17750 S.W. 154TH STREET
CITY - ST - ZIP	MIAMI, FL 331871269
TITLE	D
NAME	MOGERMAN, RICHARD M
STREET ADDRESS	150 SOUTH PINE ISLAND ROAD STE 300
CITY - ST - ZIP	PLANTATION, FL 33324
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000781732  
01/15/08-80046-013 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 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 my address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/2008 954920-5595  
Date Daytime Phone #