2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2019
Secretary of State
6876431421CC

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Entity Name: HARBORAGE YACHT MASTER ASSOCIATION, INC.

Current Principal Place of Business:

955 NW FLAGLER AVE
STUART, FL 34994

Current Mailing Address:

459 NW PRIMA VISTA BLVD
PORT ST. LUCIE, FL 34983 US

FEI Number: 20-8438653

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS EARLE BONAN & ENSOR, P.A.
789 S FEDERAL HIGHWAY
SUITE 101
STUART, FL 34994 US

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: DEBORAH ROSS 01/28/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER, SECRETARY
Name	RALEY, LOUIS
Address	875 NW FLAGLER AVE
City-State-Zip:	STUART FL 34994

Title	D
Name	LUNDQUIST, KARL
Address	975 NW FLAGLER AVE
City-State-Zip:	STUART FL 34994

Title	DIRECTOR
Name	SMITH, ROBERT
Address	215 NW FLAGLER AVE.
City-State-Zip:	STUART FL 34994

Title	DIRECTOR
Name	HERMAN, GARY
Address	275 NW FLAGLER AVE
City-State-Zip:	STUART FL 34994

Title	PRESIDENT
Name	NEWELL, NORMAN
Address	875 NW FLAGLER AVE.
City-State-Zip:	STUART FL 34994

Title	D
Name	KUYRKENDALL, GENE
Address	715 NW FLAGLER AVE
City-State-Zip:	STUART FL 34994

Title	DIRECTOR
Name	KING, WILLIAM
Address	701 NW FEDERAL HWY SUITE 402
City-State-Zip:	STUART FL 34994

I hereby 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 all other like empowered.

SIGNATURE: NORMAN NEWELL PRESIDENT 01/28/2019

Electronic Signature of Signing Officer/Director Detail — Date