

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700166

FILED
Jan 16, 2009
Secretary of State

Entity Name: ST. PETERSBURG YACHT CLUB

Current Principal Place of Business:

11 CENTRAL AVENUE
ST PETERSBURG, FL 337013998

New Principal Place of Business:

11 CENTRAL AVE
ST. PETERSBURG, FL 337013998

Current Mailing Address:

11 CENTRAL AVENUE
ST PETERSBURG, FL 337013998

New Mailing Address:

11 CENTRAL AVE
ST. PETERSBURG, FL 337013998

FEI Number: 59-0433240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARDES, PAUL P
11 CENTRAL AVE
ST. PETERSBURG, FL 33701 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: DEUEL, FRED C III
Address: 6901 28TH ST S.
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: JOHNSON, ROBERT L
Address: 1935 KANSAS AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D () Delete
Name: DOYLE, RICHARD T
Address: 1957 ARROWHEAD DR. NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: T () Delete
Name: VARGAS, EDUARDO M
Address: 59 DOLPHIN DR.
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, ROBERT L
Address: 1935 KANSAS AVE NE
City-St-Zip: ST. PETERSBURG, FL 33703 US

Title: D (X) Change () Addition
Name: DOYLE, RICHARD T
Address: 1957 ARROWHEAD DR NE
City-St-Zip: ST. PETERSBURG, FL 33703 US

Title: D (X) Change () Addition
Name: VARGAS, EDUARDO M
Address: 59 DOLPHIN DR
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: T (X) Change () Addition
Name: WALLACE, THOMAS R
Address: 343 BRIGHTWATERS BLVD NE
City-St-Zip: ST. PETERSBURG, FL 33704 US

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: ROBERT B. LOVEJOY

GM

01/16/2009

Electronic Signature of Signing Officer or Director

Date