

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700452

FILED
Jul 06, 2004
Secretary of State**Entity Name:** CORAL GABLES YACHT CLUB INC.**Current Principal Place of Business:**C/O LORING EVANS
ONE GROVE ISLE APT 1701
COCONUT GROVE, FL 33133**New Principal Place of Business:****Current Mailing Address:**C/O LORING EVANS
ONE GROVE ISLE APT 1701
COCONUT GROVE, FL 33133**New Mailing Address:****FEI Number:** 23-7452393**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EVANS, LORING
ONE GROVE ISLE
APT 1701
COCONUT GROVE, FL 33133 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:** DVC () Delete
Name: RANDLE, WILLIAM
Address: 1 GROVE ISLE DRIVE APT. 1401
City-St-Zip: COCONUT GROVE, FL 33133**Title:** DC () Delete
Name: EVANS, LORING
Address: 1 GROVE ISLE DRIVE APT. 1401
City-St-Zip: COCONUT GROVE, FL 33133**Title:** D () Delete
Name: JOHNSON, LAWSON C M.D.
Address: 10400 LAKESIDE DRIVE
City-St-Zip: CORAL GABLES, FL 33156**Title:** D () Delete
Name: COOPER, THOMAS L
Address: 15790 LINDBERG LANE
City-St-Zip: WELLINGTON, FL 33414**Title:** DST () Delete
Name: ROBBINS, WILLIAM R
Address: 830 LUGO AVE
City-St-Zip: CORAL GABLES, FL 33156**Title:** D () Delete
Name: JONES, ROBERT H
Address: 2340 NE 31ST COURT
City-St-Zip: LIGHTHOUSE POINT, FL 33064**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
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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 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 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: WILLIAM R. ROBBINS

DST

07/06/2004

Electronic Signature of Signing Officer or Director

Date