2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# 702638

Entity Name: THE FLORIDA YACHT CLUB, INC.

Current Principal Place of Business:

5210 YACHT CLUB ROAD
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5210 YACHT CLUB ROAD
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 59-0248800 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMPE, WALTER M
4632 ARGONNE LANE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

MCARTHUR, WILLIAM A
3844 TIMUQUANA ROAD
JACKSONVILLE, FL 32210 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: WILLIAM A MCARTHUR 01/07/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROGERS, ARNOLD S
Address: 3445 RICHMOND ST
City-St-Zip: JACKSONVILLE, FL 32205

Title: D ( ) Delete
Name: MC ARTHUR, W A
Address: 3844 TIMUQUANA RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: S ( ) Delete
Name: SHAD, MIKE
Address: 5071 YACHT CLUB RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete
Name: LAMPE, WALTER M
Address: 4632 ARGONNE LANE
City-St-Zip: JACKSONVILLE, FL 32210

Title: T ( ) Delete
Name: THOMAS, BRYAN
Address: 6247 ORTEGA FARMS BLVD
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SHAD, MIKE
Address: 5071 YACHT CLUB RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: T (X) Change ( ) Addition
Name: VINYARD, HERSCHEL T JR
Address: 4447 CHIPPEWA AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S (X) Change ( ) Addition
Name: THOMAS, BRYAN
Address: 6247 ORTEGA FARMS BLVD
City-St-Zip: JACKSONVILLE, FL 32244

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: WILLIAM A MCARTHUR D 01/07/2009
Electronic Signature of Signing Officer or Director Date