2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State
04-13-2005 90052 045 ****61.25

DOCUMENT # 702781

1. Entity Name
GULF HARBORS YACHT CLUB, INC.

Principal Place of Business	Mailing Address
3926 MARINE PARKWAY NEW PORT RICHEY, FL 34652	3926 MARINE PARKWAY NEW PORT RICHEY, FL 34652

01192005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1714051 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~GARRITY, THOMAS A~~ CYNDIE. SMITH
3907 MARINE PARKWAY 6333 FJORD WAY
NEW PORT RICHEY, FL 34652 NEW PORT Richey FL 34652

7. Name and Address of New Registered Agent

Name CYNDIE SMITH
Street Address (P.O. Box Number is Not Acceptable) 6333 FJORD WAY
City NEW PORT Richey **FL** Zip Code 34652

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 _____ Treasurer 4/05/05
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, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C FLYNN, BETTE 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PIERCE PRATT, COMMODORE 5537 SEA FOREST DR #325 NEW PORT RICHEY FL 34652 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC KOCH, CARMEN 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC MARYJO LANGIE 5648 ALTO AVE. PORT Richey FL 34668 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RC SCHULTZ, MICKIE 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RC DAVID KUCINA 3505 WOODMERE CT. HOLIDAY FL. 34691 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMPBELL, JOHN 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LINDA CHAMPANOIS 3907 MARINE PKW NEW PORT Richey FL. 34652 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARTH, NANCY 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CYNDIE SMITH 6336 FJORD WAY NEW PORT Richey FL 34652 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANNAFORD, WENEDELL 3926 MARINE PKWY NEW PORT RICHEY, FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FC ALT EICKENBURG PO BOX 701 ELFERS FL 34680 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 an address, with all other like empowered.

SIGNATURE: _____ 4/8/05 727-844 0557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #