

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90016 026 ****61.25

DOCUMENT # 702781

1. Entity Name
GULF HARBORS YACHT CLUB, INC.



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

Mailing Address
**3926 MARINE PARKWAY
NEW PORT RICHEY, FL 34652**

50007575



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03052006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1714051

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, CYNDIE
6333 FORD WAY
NEW PORT RICHEY, FL 34652**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

[Signature]

CYNDIE SMITH, TREASURER

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, 2006**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFO
COMMODORE PIERCE, PRATT
5537 SEA FIRES DR #305
NEW PORT RICHEY, FL 34652** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
LANGIE, MARYJO
5648 AUTO AVE
NEW PORT RICHEY, FL 34652** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**RC
KUCINA, DAVID
3805 WOODMUSE CT
NEW PORT RICHEY, FL 34652** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
CHAMPANOS, LINDA
3907 MARINE PKW
NEW PORT RICHEY, FL 34652** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SMITH, CYNDIE
8753 FORD WAY
NEW PORT RICHEY, FL 34652** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**FC
BURG, EICKEN
PO BOX 701
ELFERS, FL 34680** ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CFO
RICHARD KNORR, COMMODORE
12709 RIVER MILL DR
HUDSON, FL 34667** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
KEN QUAKENBUSH
4032 MARINE PKW
NEW PORT RICHEY, FL 34652** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**RC
TONY MAJKA
12054 QUAIL RIDGE DR
SPRING HILL, FL 34610** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DANIEL SPARR
9150 HAWKINS CT.
NEW PORT RICHEY, FL 34655** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SMITH, CYNDIE
8753 FORD WAY
NEW PORT RICHEY, FL 34652** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**FC
Bill JONES
407 MISTWOOD CT
SPRING HILL, FL 34609-9635** ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

[Signature]

RICHARD J. KNORR

3-20-06

COMMODORE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #