


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90157 010 ****61.25

DOCUMENT # 704616	
1. Entity Name YACHT HARBOR MANOR PROPERTY OWNERS' ASSOCIATION, INC.	

Principal Place of Business 1080 MORSE BLVD SINGER ISLAND, FL 33404 US	Mailing Address 1080 MORSE BLVD SINGER ISLAND, FL 33404 US
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2. Principal Place of Business - No P.O. Box # 1120 POWELL DR.	3. Mailing Address 1120 POWELL DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State RIVIERA BEACH, FL	City & State RIVIERA Bch, FL
Zip 33404	Zip 33404
Country U.S.A	Country U.S.A



03182007 Chg-NP CR2E037 (12/06)

8. Name and Address of Current Registered Agent NEVINS, ROBERT 1080 MORSE BLVD SINGER ISLAND, FL 33404	
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4. FEI Number 59-2810684	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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: 	DATE: 4-16-07
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOLOWSKI, FRED 1220 MORSE BLVD WEST PALM BEACH, FL 33404 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DIMEO, DIANA 1030 POWELL DR RIVIERA BEACH, FL 33404 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEVINS, ROBERT 1080 MORSE BLVD WEST PALM BEACH, FL 33404 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARDO, DAWN 1251 SINGER DR RIVIERA BEACH, FL 33404 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTTS, ROBBIE 1140 SINGER DRIVE RIVIERA BEACH, FL 33404 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUNTZ, ED 1120 POWELL DR RIVIERA BEACH, FL 33404 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, BILL 1021 POWELL DR. RIVIERA Bch, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRANKH, JANET 1070 SINGER DR. RIVIERA Bch, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACDONALD, PAUL 1020 POWELL RIVIERA Bch, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILT, BOB 1110 POWELL RIVIERA Bch, FL 33404 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BUTTS, ROBBIE 1140 SINGER DR. RIVIERA Bch, FL 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUNTZ, ED 1120 POWELL DR. RIVIERA Bch, FL 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: 	DATE: 4/16/07	DAYTIME PHONE: 561 842-1166
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EDWARD J. KUNTZ

ADD: FRED DIOGUARDI
1295 SINGER DR
RIVIERA BEACH, FL 33404