2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# 709561

Entity Name: YACHT VIEW CONDOMINIUM, INC.

Current Principal Place of Business:

2734 NORTHEAST 27 CT
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

2734 NORTHEAST 27 CT
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 59-2675942 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KASTELIC, CAROLYN
2734 NE 27TH CT., #7
LIGHTHOUSE POINT, FL 33064 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: P ( ) Delete
Name: NORBY, PATRICIA
Address: 2734 NE 27TH CT #18
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: T ( ) Delete
Name: GURAINO, ROBERT
Address: 28374 NE 27TH CT #16
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S ( ) Delete
Name: BOONENBERG, SANDRA
Address: 2734 NE 27TH CT., #9
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D ( ) Delete
Name: MCFADDEN, JAMES
Address: 2734 NE 27 CT #3
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: D ( ) Delete
Name: KAHILA, TERI
Address: 1070 NW 3RD ST
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete
Name: POPOWICZ, JENNEFER
Address: 2734 NE 270 CT 11
City-St-Zip: POMPANO BEACH, 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
Name:
Address:
City-St-Zip:

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

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

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

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: PATRICIA NORBY PRES 01/30/2009

Electronic Signature of Signing Officer or Director — Date