

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90010 003 ****61.25

DOCUMENT # 714769 1. Entity Name THE GULF STREAM YACHT CLUB																																																																																																																																																											
Principal Place of Business 770 NE 37TH ST. BOCA RATON, FL 33431			Mailing Address 770 NE 37TH ST. BOCA RATON, FL 33431																																																																																																																																																								
2. Principal Place of Business 2200 Macfarlane Dr. Suite, Apt. #, etc. #303N City & State Delray Beach, FL Zip 33483		3. Mailing Address 200 Macfarlane Dr. Suite, Apt. #, etc. #303 N City & State Delray Beach FL Zip 33483		4. FEI Number 59-1002366 Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																							
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent SILVER, BERNARD R 200 MACFARLANE DRIVE #303 DELRAY BEACH, FL 33483				7. Name and Address of New Registered Agent 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 <u>Bernard R. Silver</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		 <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE <u>March 30</u>																																																																																																																																																							
Filing Fee is \$61.25 Due by May 1, 2005		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																																																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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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: <u>Bernard R. Silver Secy</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR</small>		DATE <u>March 30/05</u> 561-278-7264 <small>Date Daytime Phone #</small>																																																																																																																																																									