

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90199 035 ****61.25

DOCUMENT # 715504

1. Entity Name

KEY BISCAVNE YACHT CLUB, INC.



Principal Place of Business

180 HARBOR DRIVE
KEY BISCAVNE FL 33149
US

Mailing Address

180 HARBOR DRIVE
KEY BISCAVNE FL 33149
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0798689

Applied For

Not Applicable

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

~~ROBINSON, DAVID J.~~
180 HARBOR DR.
KEY BISCAVNE FL 33149

Name

LEE PIRES

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

180 HARBOR DRIVE

City

KEY BISCAVNE

FL

Zip Code

33149

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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	S	☐ Delete
NAME	MANLA, LINDA	
STREET ADDRESS	180 HARBOR DR	
CITY-ST-ZIP	KEY BISCAVNE FL 33149	
TITLE	C	☒ Delete
NAME	SCHMACHTENBERG, LEE C	
STREET ADDRESS	180 HARBOR DR.	
CITY-ST-ZIP	KEY BISCAVNE FL 33149	
TITLE	CV	☒ Delete
NAME	DRUCKER, RONALD W	
STREET ADDRESS	180 HARBOR DRIVE	
CITY-ST-ZIP	KEY BISCAVNE FL	
TITLE	T	☐ Delete
NAME	YEHLE, MARK	
STREET ADDRESS	180 HARBOR DRIVE	
CITY-ST-ZIP	KEY BISCAVNE FL 33149	
TITLE	D	☒ Delete
NAME	GARCIA RIBEYRO, GONZALO H	
STREET ADDRESS	180 HARBOR DR.	
CITY-ST-ZIP	KEY BISCAVNE FL 33149	
TITLE	D	☐ Delete
NAME	FRIED, MARK	
STREET ADDRESS	180 HARBOR DR.	
CITY-ST-ZIP	KEY BISCAVNE FL 33149	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Change ☐ Addition
NAME	COMMODORE
STREET ADDRESS	PAUL LAUCHTER
CITY-ST-ZIP	180 HARBOR DRIVE KEY BISCAVNE, FL 33149
TITLE	☒ Change ☐ Addition
NAME	VICE COMMODORE
STREET ADDRESS	EDWARD LONDON
CITY-ST-ZIP	180 HARBOR DRIVE KEY BISCAVNE, FL 33149
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☒ Change ☐ Addition
NAME	D
STREET ADDRESS	EDWARD STONE
CITY-ST-ZIP	180 HARBOR DR, KEY BISCAVNE, FL
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/17/07 305-361-9171