

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715592

FILED
Mar 20, 2009
Secretary of State

Entity Name: SANFORD YACHT CLUB, INC.

Current Principal Place of Business:

2099 SHADOW DRIVE
GENEVA, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

204 LARKWOOD DRIVE
STE 100
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, CARLTON J
204 LARKWOOD DRIVE
STE 100
SANFORD, FL 32771 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: PD () Delete
Name: CARUSO, FRED A
Address: 2100 SHADY LN
City-St-Zip: GENEVA, FL 32732 US

Title: VD () Delete
Name: DYER, JACK M JR
Address: 3106 KATHLEEN DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: SD () Delete
Name: CARUSO, CLAUDIA
Address: 2100 SHADY LN
City-St-Zip: GENEVA, FL 32732 US

Title: TD () Delete
Name: JACOBS, CARLTON J
Address: 204 LARKWOOD DR
City-St-Zip: SANFORD, FL 32771 US

Title: D () Delete
Name: SANDERS, THOMAS B
Address: 4614 REDFERN DR
City-St-Zip: ORLANDO, FL 32839 US

Title: D () Delete
Name: JACOBS, WILLIAM T
Address: 1150 LAKE HARNEY ROAD
City-St-Zip: GENEVA, FL 32732 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: LAMBRECHT, RICHARD
Address: 2290 MULLETT LAKE PARK RD
City-St-Zip: GENEVA, FL 327329049 US

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: CARLTON J. JACOBS

TREA

03/20/2009

Electronic Signature of Signing Officer or Director

Date