2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 726476

Entity Name: THE CORAL BAY YACHT CLUB, INC.

Current Principal Place of Business:

12891 DEVA ST
CORAL GABLES, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

12891 DEVA ST
CORAL GABLES, FL 33156 US

New Mailing Address:

FEI Number: 59-2065493 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARKER, ROSALIE S
12891 DEVA STREET
CORAL GABLES, FL 33156 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: VPD ( ) Delete
Name: LEVINE, DANIEL
Address: 825 BELLA VISTA AVE.
City-St-Zip: CORAL GABLES, FL 33156

Title: VPD ( ) Delete
Name: CARRICARTE, CHARLIE
Address: 1095 BELLA VISTA AVENUE
City-St-Zip: CORAL GABLES, FL 33156

Title: VPD ( ) Delete
Name: MILLER, STEVE
Address: 1022 SAN PEDRO AVE.
City-St-Zip: CORAL GABLES, FL 33156

Title: TD ( ) Delete
Name: PARKER, ROSALIE S-B.
Address: 12891 DEVA ST
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: CARRICARTE, CHARLIE
Address: 1095 BELLA VISTA AVENUE
City-St-Zip: CORAL GABLES, FL 33156

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: LEE PARKER T 04/14/2009

Electronic Signature of Signing Officer or Director Date