2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 10, 2009
Secretary of State

DOCUMENT# 726793

Entity Name: YACHT HARBOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2901 SOUTH BAYSHORE DRIVE
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

2901 SOUTH BAYSHORE DRIVE
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 59-1595964 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: BECKMANN, SIGRID
Address: 2901 S BAYSHORE DRIVE #12-B
City-St-Zip: MIAMI, FL 33133

Title: TR ( ) Delete
Name: ITURREY, MIKE
Address: 2901 S BAYSHORE DRIVE #6-H
City-St-Zip: COCONUT GROVE, FL 33133

Title: V ( ) Delete
Name: DONES, LILIANA
Address: 2901 S BAYSHORE DR # 4-B
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD ( ) Delete
Name: SANDBERG, DOUGLAS
Address: 2901 S BAYSHORE DR #4-A
City-St-Zip: COCONUT GROVE, FL 33133

Title: D ( ) Delete
Name: SCHUETTE, ISABELLE
Address: 2901 S BAYSHORE DR #6-C
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TR (X) Change ( ) Addition
Name: SCHUETTE, CHARLES
Address: 2901 S BAYSHORE DRIVE #6-C
City-St-Zip: COCONUT GROVE, FL 33133

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: SIGRID BECKMANN PD 09/10/2009

Electronic Signature of Signing Officer or Director — Date