

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 739274

FILED
Nov 02, 2008
Secretary of State

Entity Name: CIRCLE BAY YACHT AND SAILING CLUB, INC.

Current Principal Place of Business:

1950 PALM CITY RD.
ATTN:TREASUER
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

1950 PALM CITY RD.
ATTN: TREASUER
STUART, FL 34994

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ATKINSON, PATRICIA
1950 SW PALM CITY RD
STUART, FL 34994 US

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: PATRICIA ATKINSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: DESLAURIER, JEAN G
Address: 1950 SW PALM CITY RD.
City-St-Zip: STUART, FL 34994

Title: VC () Delete
Name: FERRIS, LES
Address: 1950 SW PALM CITY RD
City-St-Zip: STUART, FL 34994

Title: S () Delete
Name: ESSENBURG, SHERLY
Address: 1950 SW PALM CITY RD.
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: SHROYER, JAN
Address: 1950 SW PALM CITY RD.
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: ATKINSON, PATRICIA
Address: 1950 SW PALM CITY RD -10-103
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: PHENEY, JOHN
Address: 1950 SW PALM CITY RD.
City-St-Zip: STUART, FL 34994

Title: VC (X) Change () Addition
Name: HOOPER, CHARLES
Address: 1950 SW PALM CITY RD
City-St-Zip: STUART, FL 34994

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: PATRICIA ATKINSON

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11/02/2008

Electronic Signature of Signing Officer or Director

Date