

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745650

FILED
May 24, 2006
Secretary of State

Entity Name: THE BOATYARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1380-1390 CHESAPEAKE AVENUE
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1390 CHESAPEAKE AE.
NAPLES, FL 34102

New Mailing Address:

FEI Number: 59-2793624 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

MOFFET, ROBERT W.
1388 CHESAPEAKE AVE.
NAPLES, FL 33962 US

Name and Address of New Registered Agent:

MOFFET, ROBERT W.
1388 CHESAPEAKE AVE.
NAPLES, FL 34102 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: _____

Electronic Signature of Registered Agent

05/24/2006

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: SMITH, MARY
Address: 1382 CHESAPEAKE AVE.
City-St-Zip: NAPLES, FL 34102

Title: PD () Delete
Name: GOULD, PATRICK
Address: 1380 CHESAPEAKE AVE
City-St-Zip: NAPLES, FL 34102

Title: TD () Delete
Name: MOFFET, ROBERT W.,
Address: 1388 CHESAPEAKE AVE.
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HYDE, GEOFFREY
Address: 1390 CHESAPEAKE AVE.
City-St-Zip: NAPLES, FL 34102

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

Title: STD (X) Change () Addition
Name: MOFFET, ROBERT
Address: 1388 CHESAPEAKE AVE
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT W. MOFFET

Electronic Signature of Signing Officer or Director

STD

05/24/2006

Date