

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755837

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** YACHT CLUB TOWERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O A&G MANAGEMENT SERVICES  
11360 FORTUNE CIRCLE, # E-6A  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

C/O A&G MANAGEMENT SERVICES  
11360 FORTUNE CIRCLE, # E-6A  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 59-2206309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

A&G MANAGEMENT SERVICES  
11360 FORTUNE CIRCLE  
SUITE E6A  
WELLINGTON, FL 33414 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:** D  
**Name:** PISER, PETER  
**Address:** 11360 FORTUNE CIRCLE, SUITE E6A  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** DS  
**Name:** HEYWOOD, JOY  
**Address:** 11360 FORTUNE CIRCLE, SUITE E6A  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** DT  
**Name:** BARATTA, ALAN  
**Address:** 11360 FORTUNE CIRCLE, SUITE E6A  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** DP  
**Name:** MADDALONE, MICHAEL  
**Address:** 11360 FORTUNE CIRCLE, SUITE E6A  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** DVP  
**Name:** SORY, DEVON  
**Address:** 11360 FORTUNE CIRCLE, SUITE E6A  
**City-St-Zip:** WELLINGTON, FL 33414

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL MADDALONE

DP

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date