2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760965

FILED Mar 14, 2009 Secretary of State

Entity Name: ENGLEWOOD BEACH & YACHT CLUB ASSOCIATION, INC.

Current Principal Place of Business: 1815 GULF BLVD ENGLEWOOD, FL 34223			New Principal Place of Business:	
Current Mailing Address: 1815 GULF BLVD ENGLEWOOD, FL 34223			New Mailing Address:	
FEI Number: 59-2654582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()				
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:	
WEBB, SANKEY E III WEBB, LORAH & COMPANY, PL CPAS 1133 BAL HARBOR BLVD, SUITE 1135 PUNTA GORDA, FL 33955 US			WEBB, SANKEY E III WEBB, LORAH & COMPANY, PL CPAS 1107 WEST MARION AVE STE 115 PUNTA GORDA, FL 33950 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:			03/14/2009	
Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () RYAN, WILLIAN 1815 GULF BLY ENGLEWOOD,	/D	Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	S () COHEN, SAM 3332 BAILEY P NORTH PORT,		Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () LASKOWSKI, G 1815 GULF BO ENGLEWOOD,	ULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () FERGUSON, W 6111 TALBOT S NORTH PORT,	STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	T () OLDREIVE, EU 1815 GULF BO ENGLEWOOD,	ULEVARD	Title: Name: Address: City-St-Zip:	()Change ()Addition

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: EUNICE OLDREIVE T 03/14/2009