

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 762936**

1. Entity Name

HARBOUR SIDE YACHT CLUB, INC.

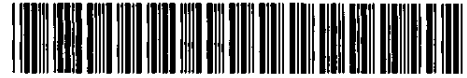


Principal Place of Business

2021 LAS RAMBLAS  
VERO BEACH FL 32963

Mailing Address

2021 LAS RAMBLAS  
VERO BEACH FL 32963



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

Zip

Country

Zip

Country

4. FEI Number

59-2355533

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERS, ROBERT M  
2021 LAS RAMBLAS  
VERO BEACH FL 32963

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Robert M. Peters*

*20 Feb 2008*

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature printed when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	COEGEL, WILLIAM	
STREET ADDRESS	1865 BAY RD # 310	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	DC	<input type="checkbox"/> Delete
NAME	LIGUORI, DAN	
STREET ADDRESS	1001 BAY RD 210 C	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DAVIDSON, ROBERT	
STREET ADDRESS	2185 VIA FUENTES	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIERCE, WAYNE	
STREET ADDRESS	2115 PORPOISE PT LANE	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PETERS, ROBERT	
STREET ADDRESS	2021 LAS RAMBLAS	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	DS	<input type="checkbox"/> Delete
NAME	STODDARD, WILLIAM	
STREET ADDRESS	1945 SURFSIDE TERRACE	
CITY-ST-ZIP	VERO BEACH FL 32963	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	U000000838749	
CITY-ST-ZIP	03/05/08-80044-008 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Robert M. Peters*

*20 Feb 2008*