

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

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90010 016 ****61.25

DOCUMENT # 767881

1. Entity Name

THE BIRD KEY YACHT CLUB FOUNDATION FUND,
INC.



Principal Place of Business

301 BIRD KEY DRIVE
SARASOTA FL 34236

Mailing Address

301 BIRD KEY DR.
SARASOTA FL 34236
US

00006311



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2411166

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EDWARDS, ROBERT B
301 BIRD KEY DRIVE
SARASOTA FL 34236

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

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

(NOTE: Registered Agent signature required when reinstating)

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	PT	☒ Delete
NAME	ROUND, JR, ROSWELL E	
STREET ADDRESS	335 BOB WHITE WAY	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	T	☐ Delete
NAME	MORRIS, RONALD R	
STREET ADDRESS	639 MOURNING DOVE DR	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	VT	☐ Delete
NAME	STEELE, H. WILLIAM	
STREET ADDRESS	560 GUNWALE LANE	
CITY-ST-ZIP	LONGBOAT KEY FL 34228	
TITLE	T	☒ Delete
NAME	HEROD, PAULA E	
STREET ADDRESS	1750 BEN FRANKLIN DR APT 10-D	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	ST	☐ Delete
NAME	COGBILL, KAREN T	
STREET ADDRESS	418 MEADOW LARK DR	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	T	☐ Delete
NAME	SCHAEFER, RICHARD H	
STREET ADDRESS	551 HARBOR COVE CIRCLE	
CITY-ST-ZIP	LONGBOAT KEY FL 34228	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P/T	☐ Change ☒ Addition
NAME	Robert R. Harlan	
STREET ADDRESS	605 S. Gulfstream Ave., #4A	
CITY-ST-ZIP	Sarasota, FL 34236	
TITLE	T	☐ Change ☒ Addition
NAME	Robert E. Petersen	
STREET ADDRESS	8350 Cypress Hollow Dr.	
CITY-ST-ZIP	Sarasota, FL 34238	
TITLE	T	☐ Change ☒ Addition
NAME	RoseMarie Molinari	
STREET ADDRESS	6939 Corral Gate Lane	
CITY-ST-ZIP	Sarasota, FL 34241	
TITLE	T	☐ Change ☒ Addition
NAME	Leslie Glass	
STREET ADDRESS	200 Bird Key Drive	
CITY-ST-ZIP	Sarasota, FL 34236	
TITLE	T	☐ Change ☒ Addition
NAME	Larry J. Ford	
STREET ADDRESS	1590 Harbor Sound Dr.	
CITY-ST-ZIP	Longboat Key, FL 34228	
TITLE	Treas/T	☒ Change ☐ Addition
NAME	Richard H. Schaefer	
STREET ADDRESS	551 Harbor Cove Circle	
CITY-ST-ZIP	Longboat Key, FL 34228	

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 R. Harlan

Robert R. Harlan 4/2/08 941-953-4455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #