## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 12, 2007 8:00 am Secretary of State **DOCUMENT # 768062** 1. Entity Name 02-12-2007 90101 010 \*\*\*\*61 25 FUTURA YACHT CLUB BUILDING A CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 88540 OVERSEAS HWY 88540 OVERSEAS HWY TAVERNIER FL 33070 TAVERNIER FL 33070 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 65-0028413 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo BECKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) 121 ALAHAMBRA PLAZA 10TH FLOOR CORAL GABLES FL 33134 City 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ROBERT MUSER HILLE DITLE 🛂 Delele SENTRYZ, JIM NAME NAME 88540 ds HGWY 4NIT 205 88540 O/S HIGHWAY, UNIT 201 STREET ADDRESS STREET ADDRESS TAVERNIER FL 33070 CHY-SI-ZIP TAVERNIER FL 33070 CLTY - ST- 7IP ☐ Delete THE ☐ Change Addition NAME MAGEE, DAVID NAME STREET ADDRESS 88540 O/S HWY, UNIT 306 STREET ADDRESS CDV-ST-7IP TAVERNIER FL 33070 CITY-ST-7IP TITLE VΡ ШU FRED DWORSKY NAME SKEEL ROB' 88540.075 HWY, UNIT 301 NAME SUS40 Of HAWY UNIT 203 TAVERNIER FL 33070 STREET ADDRESS STREET ADDRESS CITY-ST-762 TAVERNIER FL 33070 CITY-ST-ZIP TITLE Delete 🔀 ☐ Addition (76,00 SHARP SCHULMANAMARC NAME NAME STREET ADDRESS STREET ADDRESS BES40 0/5 HAWY UNITION 88540 O/S HWY, UNIT 603 C1TY-ST-ZIP CITY-ST-ZIP TAUERNIEN FL 33070 TAVERNIER FL 33070 ☐ Change TITLE IIILE ΑL ☐ Delete ☐ Addition NAME NAME BAILEY, GEORGE STREET ADDRESS 88540 BIS HWY UNIT 602 STREET ADDRESS CHY-ST-ZIP TAVERNIER FL 33070 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNAT	URE:	

CITY-SI-74P

Date

FILED

Daytime Phone #