FILED
Apr 24, 2007 8:00 am
Secretary of State
02-22-2007 90008 028 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 768789

1. Entity Name
MATHESON HAMMOCK YACHT CLUB, INC.

Principal Place of Business	Mailing Address
8490 SW 83 ST MIAMI, FL 33143 US	8490 SW 83 ST MIAMI, FL 33143 US

02132007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2298468 ☐ 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
COWAN, ALIDA 8490 SW 83 ST MIAMI, FL 33143	Name MERI MAC CROSBY Street Address (P.O. Box Number is Not Acceptable) 15220 S.W. 158 ST City MIAMI FL Zip Code 33187

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 Alida Cowan ALIDA COWAN
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

~~Filing Fee is $61.25~~
~~Due by May 1, 2007~~

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C REYNARD, VICKY 5333 COLLINS AVE #601 MIAMI BEACH, FL 33140 PAST COMMODORE ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICKY REYNARD DELETION PAST COMMODOR ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC FOSTER, EARL 14301 SW 75 CT MIAMI, FL 33158 COMMODORE ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MERI MAC CROSBY 15220 S.W. 158 ST MIAMI FL 33187 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T COWAN, ALIDA 8490 SW 83 ST MIAMI, FL 33143 BOARD OF DIRECTOR ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X Meri Mac Crosby ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KURUCZ, JOAN 6140 SW 90 CT MIAMI, FL 33173 BOARD OF DIRECTOR ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRESURER ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Alida Cowan ALIDA COWAN 2/20/07 305-279-7442
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #