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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 769728

(7)

	BORO COVE YACHT CLUB,	INC.					
Principal Place of Business Mailing Address					1 196111 10610 BELLO (2011 1021)	IRAN IRIN MIBIL ACOM DIGIL DIQ	11 E1011 O(DII 1961
1365 E HILLSBORO BLYD. DEERFIELD BEACH FL 33441		1365 E HILLSBORO BLVD. DEERFIELD BEACH FL 33441					
					 Date Incorporated or Qualified 08/08/1983 	d 3a. Date of Las 04/20/	
. Principal Pl]	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	#. etc	Suite, Apt. #, etc.			59-2364844		Not Applicable
	., =	27			5. Certificate of Status Desired		5 Additional Required
City & State	e	City & State	······································		6. Election Campaign Financing		00 May Be
		28			Trust Fund Contribution		ed to Fees
Zip	Country	Z _I p	Countr	У	8. This corporation has liability for		s. 199.032,
	9. Name and Address of Curre	29 Annual Agent	30		Florida Statutes	Yes No	
		nt riegistered Agent	8	Name	10. Name and Address of New	Hegistered Agent	
KNOX, JOHN W.				1 10			
	HILLSBORO BLVD. #633		62	Street Ac	Address (P.O. Box Number is Not Acceptable)		
DEERFIE	LD BEACH FL 33441		83	3			
			84	City			
				' '		3−1	ip Code
O Og. O	to the provisions of Sections 617.0502 red agent, or both, in the State of Flori th, and accept the obligations of, Sect	ua. Buch Change was autho	JUSEO DA GUE COU	-named corp poration's bo	ioration submits this statement for the popular of directors. Thereby accept the ap	purpose of changing its opointment as registered	d agent. I am
familiar wit	th, and accept the obligations of, Sect Signature, typed or printed name of registered agent OFFICERS AN	tion 617.0503, Florida Statul	JUSEO DA GUE COU	ooration's bo	and of directors. I hereby accept the ap	DATE	d agent. I am
familiar wit	th, and accept the obligations of, Sect Signature, typed or printed name of registered agent OFFICERS AN PD	tion 617.0503, Florida Statul	tes. (NOTE Flogistered Age	ont signature risig	pard of directors. Thereby accept the ap	DATE	d agent. I am
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Date

MARCH 6, 1996

Daytime Phone #

(954) 426-4001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TREASURER

JOHN W. KNOX

SIGNATURE: