2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# 769893

Entity Name: YACHTSMAN'S INN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

24 DOCKSIDE LANE #145
KEY LARGO, FL 33037 US

New Principal Place of Business:

35 OCEAN REEF DRIVE
138
KEY LARGO, FL 33037 US

Current Mailing Address:

24 DOCKSIDE LANE #145
KEY LARGO, FL 33037 US

New Mailing Address:

6700 N. ANDREWS AVE
SUITE 600
FORT LAUDERDALE, FL 33309 US

FEI Number: 59-2379979 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIMOTHY NICHOLAS THOMES, PA
99198 OVERSEAS HIGHWAY
SUITE 8
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

CSI MANAGEMENT SERVICES
6700 N. ANDREWS AVE.
SUITE 600
FORT LAUDERDALE, FL 33309 US

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.

SIGNATURE: KATHARINE OLIVIA-EFFRON, LCAM 03/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete
Name: GLOVER, JOHN
Address: 24 DOCKSIDE LANE #145
City-St-Zip: KEY LARGO, FL 33037

Title: VP/D ( ) Delete
Name: LEE, ROSEANNA
Address: 24 DOCKSIDE LANE #145
City-St-Zip: KEY LARGO, FL 33037

Title: ST/D ( ) Delete
Name: HAMMETT, GREY
Address: 24 DOCKSIDE LANE #145
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition
Name: GLOVER, JOHN
Address: 6700 N. ANDREWS AVE, SUITE 600
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VP/D (X) Change ( ) Addition
Name: LEE, ROSEANNA
Address: 6700 N. ANDREWS AVE. SUITE 600
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ST/D (X) Change ( ) Addition
Name: HAMMETT, GREY
Address: 6700 N. ANDREWS AVE. SUITE 600
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSEANNA LEE VP 03/30/2009
Electronic Signature of Signing Officer or Director Date