2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 02, 2005 8:00 am Secretary of State

DOCUMENT # F9600001218 1. Entity Name THE YACHT CLUB AT AVENTURA, INC.						09-02-2005 90012 049 ***158.75				
Principal Place of Business Mailing Address										
1212 N LASALLE STREET 1212 N LASALLE STREET			ET			50064552				
SUITE 110 SUITE 110 CHICAGO, IL 60610 CHICAGO, IL 60610					e e					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07132005	Chg-P	CR2E0	34 (10/03)		
City & State		City & State			4. FEI Numi 36-40			<u> </u>	plied For t Applicable	
Zip Country		Zip	Count	гу		of Status Desired	E	\$8.75 Add	itional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
CORPORATE CERVICE COMPANY				Name						
1201 HAYS				Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE, FL 32301										
; *			ĺ	City			FL	Zip Code	3	
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										
FILE NOWIII FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Trust Fund Contribu				cing	\$5.00 May Be Added to Fees	In accordance corporation did				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS	PD GOULETAS, STEVEN 1028 N CLARK SÜITE 410	☐ Delete		ET ADDRESS	D OUL <i>ETA</i> 212 N. LA			∑ Change	☐ Addition	
CiTY-ST-ZIP	CHICAGO, IL 60611	P***	_		HICAGO	,IL 60	ωiO	PP 0		
NAME STREET ADDRESS	DIBENEDETTO, ANTHONY R 1212 N LASALLE SUITE 110	Delete	1	ET ADDRESS 12	212 N. L		STE.III	Change	☐ Addition	
CITY-ST-ZIP	CHICAGO, IL 60611			1	HICAGO,	16061	0	☐ Change	☐ Addition	
TITLE NAME	SCHWARK, JAMES	☐ Delete	TITLE	I .				change	L) Addition	
STREET ADDRESS	1212 N LASALLE SUITE 100			ET ADDRESS						
CITY-ST-ZIP	CHICAGO, IL 60611		4—	-ST-ZIP					NOT A CONT.	
TITLE NAME		☐ Delete	TITLE	Y	TSH MT	HAEL A	ا خسسہ ،	☐ Change	Addition	
STREET ADDRESS				ET ADDRESS	212 N. LAS	SALLE	57 <i>E. </i>	O		
CITY-ST-ZIP			CITY-	·ST-ZIP	ISH , MIC LIZ N. LAS HICAGO,	IL 60(010			
TITLE		☐ Delete	TITLE		•			☐ Change	☐ Addition	
NAME STREET ADDRESS			•	ET ADDRESS						
CITY-ST-ZIP				-ST-ZIP						
TITLE		☐ Delete	TITLE	I .				Change	☐ Addition	
NAME CERTE ADDRESS			MANI	E ADDDCCC						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with address with all phosphered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE: _

DIRECTOR

M7-13-2006

312-595-471

Date

Daytime Phone #