

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F96000001218

1. Entity Name

THE YACHT CLUB AT AVENTURA, INC.



Principal Place of Business

1030 NORTH CLARK ST
SUITE 300
CHICAGO, IL 60610

Mailing Address

1030 NORTH CLARK ST
SUITE 300
CHICAGO, IL 60610

FILED

08 FEB 20 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01312008 No Chg-P CR2E034 (11/05)

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4. FEI Number
36-4068498

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

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IN THIS SPACE

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 \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GOULETAS, STEVEN
STREET ADDRESS	1030 NORTH CLARK ST SUITE 300
CITY-ST-ZIP	CHICAGO, IL 60610
TITLE	S
NAME	DIBENEDETTO, ANTHONY R
STREET ADDRESS	1030 NORTH CLARK ST SUITE 300
CITY-ST-ZIP	CHICAGO, IL 60610
TITLE	T
NAME	SCHWARK, JAMES
STREET ADDRESS	1212 N LASALLE SUITE 100
CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	V
NAME	FISH, MICHAEL A
STREET ADDRESS	1030 NORTH CLARK ST SUITE 300
CITY-ST-ZIP	CHICAGO, IL 60610
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-05 312-595-4714