

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K72995

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: DOG ISLAND YACHT CLUB, INC.

## Current Principal Place of Business:

4317 PARK DRIVE, #400  
NORCROSS, GA 30093 US

## New Principal Place of Business:

## Current Mailing Address:

4317 PARK DRIVE, #400  
NORCROSS, GA 30093 US

## New Mailing Address:

FEI Number: 58-1844462      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAUDERDALE, DICK  
4269 MIDDLEBROOK LANE  
ORLANDO, FL 32812 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: LAUDERDALE, DICK  
Address: 4269 MIDDLEBROOK LN  
City-St-Zip: ORLANDO, FL 32812

Title: DV ( ) Delete  
Name: HUNTSMAN, LAWRENCE W  
Address: UNIT 1 BLOCK 8 LOT 7  
City-St-Zip: DOG ISLAND, FL 32322

Title: DT ( ) Delete  
Name: PRUITT, TRAVIS N  
Address: 4317 PARK DRIVE, #400  
City-St-Zip: NORCROSS, GA 30093

Title: DS ( ) Delete  
Name: PEREZ, EFRAIN  
Address: 175 HWY 78 NW  
City-St-Zip: MONROE, GA 30655

Title: D ( ) Delete  
Name: HANNON, MIKE  
Address: PO BOX 5272  
City-St-Zip: TALLAHASSEE, FL 32314

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRAVIS PRUITT

DT

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date