

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K99972

1. Corporation Name

SEA OAKS YACHT CLUB, INC.

Principal Place of Business
1235 WINDING OAKS CIRCLE
VERO BEACH FL 32963

Mailing Address
1235 WINDING OAKS CIRCLE
VERO BEACH FL 32963
US

FILED
Jul 14, 1999 8:00 am
Secretary of State

07-14-1999 90002 009 ***558.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/05/1989

4. FEI Number

65-0136461

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

BRION, JACQUES
1235 WINDING OAKS CIRCLE
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 Suite 302

84 City

Coconut Grove

FL

85 Zip Code

33133

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Andrew Kwiat

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME BRION, JACQUES
STREET ADDRESS 1235 WINDING OAKS CIR
CITY-ST-ZIP VERO BEACH FL
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

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CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Meunier, Jean Marc
1.3 STREET ADDRESS 2665 S Bayshore Dr Suite 302
1.4 CITY-ST-ZIP Coconut Grove, FL 33133
☐ Change ☒ Addition

2.1 TITLE Vice President
2.2 NAME Eric Fazilleau
2.3 STREET ADDRESS 2665 S Bayshore Dr Suite 302
2.4 CITY-ST-ZIP Coconut Grove FL 33133
☐ Change ☒ Addition

3.1 TITLE Vice President
3.2 NAME Giebel, George
3.3 STREET ADDRESS 2665 S Bayshore Dr Suite 302
3.4 CITY-ST-ZIP Coconut Grove FL 33133
☐ Change ☒ Addition

4.1 TITLE Secretary, Treasurer
4.2 NAME Kwiat, Andrew
4.3 STREET ADDRESS 2665 S Bayshore Dr Suite 302
4.4 CITY-ST-ZIP Coconut Grove FL 33133
☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/8/99

305 858 7749

CR2E034 (5/99)