2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008538

FILED Jul 10, 2008 Secretary of State

Entity Name: YACHT CLUB AT TREASURE COVE HOMEOWNER'S ASSOCIATION, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
8851 NE TH FLOC MAMI, FL		
urrent N	lailing Address:	New Mailing Address:
8851 NE TH FLOC MAMI, FL		
n accordan	: 34-1977294 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation did r I Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired () not receive the prior notice. Name and Address of New Registered Agent:
POSNER,	GARI	
VENTUF	29TH AVE 7TH FLOOR RA, FL 33180 US named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or bo
NENTUF	RA, FL 33180 US named entity submits this statement for the e of Florida.	purpose of changing its registered office or registered agent, or bo
VENTUF he above the State	RA, FL 33180 US named entity submits this statement for the e of Florida.	
NENTUF The above In the Stat SIGNATU	RA, FL 33180 US named entity submits this statement for the e of Florida. RE:	
VENTUF he above i the Stat IGNATU	RA, FL 33180 US e named entity submits this statement for the e of Florida. RE: Electronic Signature of Registered Ag	gent Date
he above the State IGNATU FFICER tte: ame: ddress:	RA, FL 33180 US e named entity submits this statement for the e of Florida. RE: Electronic Signature of Registered Ag S AND DIRECTORS: PD () Delete POSNER, GARY D 18851 NE 29TH AVE 7TH FLOOR	gent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address:

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: GARY D. POSNER PRES 07/10/2008