2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004109

FILED Jan 21, 2009 Secretary of State

Entity Name: SUNSET HARBOUR YACHT CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 1928 SUNSET HARBOUR DR MIAMI BEACH, FL 33139 **Current Mailing Address: New Mailing Address:** 1928 SUNSET HARBOUR DR MIAMI BEACH, FL 33139 FEI Number: 33-1063066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FULLERTON LAW GROUP LLP 2000 PONCE DE LEON BLVD SUITE 501 CORAL GABLES, FL 33134 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SILBERMAN, CYRIL Name: Name: 1928 SUNSET HARBOUR DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: Title: DVP () Delete Title: () Change () Addition Name: GARCIA, CARLOS Name: Address: 1928 SUNSET HARBOUR DR Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: Title: () Delete Title: DS (X) Change () Addition SPELTS, CLAIRE Name: RYAN, JOSEPH Name: 1928 SUNSET HARBOUR DRIVE 1928 SUNSET HARBOUR DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 Title: DT () Delete Title: () Change () Addition Name: MCVEY, ANN MARIE Name: 1928 SUNSET HARBOUR DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYRIL SILBERMAN DP 01/21/2009