

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009851

FILED
Jan 20, 2009
Secretary of State

Entity Name: CORTEZ YACHT CLUB, INC.

Current Principal Place of Business:

2601 GULF DRIVE N
#212
BRADENTON, FL 34217

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 252
CORTEZ, FL 34215

New Mailing Address:

FEI Number: 27-0071424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GODDARD, JAMES P
6108 26TH ST WEST
BRADENTON, FL 34210 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

OFFICERS AND DIRECTORS:

Title: CMDR () Delete
Name: WISOTZKE, WILLIAM
Address: 2601 GULF DRIVE N #212
City-St-Zip: BRADENTON, FL 34210

Title: VCMD () Delete
Name: GARBUS, JOSEPH
Address: 237 17TH STREET
City-St-Zip: BRADENTON BEACH, FL 34217

Title: T () Delete
Name: YOUNG, ROBERT J
Address: P.O. BOX 183
City-St-Zip: BRADENTON BEACH, FL 34217

Title: S () Delete
Name: RADZAVAGE, DIANE
Address: 4802 51ST STREET WEST NO 1603
City-St-Zip: BRADENTON, FL 34210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: WILSON, PATRICIA
Address: 3728 115TH ST W
City-St-Zip: BRADENTON, FL 34210

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

SIGNATURE: PATRICIA WILSON

T

01/20/2009

Electronic Signature of Signing Officer or Director

Date