2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001268

FILED Jan 31, 2009 Secretary of State

Entity Name: CHARLOTTE HARBOR SINGLES FOR SAIL, INC.

Current Principal Place of Business: New Principal Place of Business:

2100 KINGS HWY. 4284 CONWAY BLVD

PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33980

New Mailing Address: Current Mailing Address:

P O BOX 512528

PUNTA GORDA, FL 339512526

FEI Number: 20-1213802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEISWANGER, MARILYN 2100 KINGS HWY.

PORT CHARLOTTE, FL 33980 US

KLIMPACHER, FRANZ 4284 CONWAY BLVD PORT CHARLOTTE, FL 33952 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: FRANZ KLIMPACHER 01/31/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WILLIAMS, OWEN W WILLIAMS, OWEN W Name: Name:

20168 EDGEWATER DRIVE Address: 20168 EDGEWATER DR Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: Title: (X) Change () Addition () Delete

Name: REISS, TERRY Name: GILLEY, KENNETH Address: 22467 SACRAMENTO AVENUE Address: 4180 SURFSIDE CT

City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Delete Title: (X) Change () Addition MULTRA, HOLLY Name: HATFIELD, AMANDA Name:

4607 KEMPSON LANE 24053 PARK PLACE DR. S Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33981 City-St-Zip: PORT CHARLOTTE, FL 33980

Title: () Delete Title: (X) Change () Addition

Name: BEISWANGER, MARILYN Name: KLIMPACHER, FRANZ 4284 CONWAY BLVD Address: 2100 KINGS HWY., UNIT 385 Address: City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: PORT CHARLOTTE, FL 33952

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: FRANZ KLIMPACHER Т 01/31/2009