

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT.**

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000001621

1. Entity Name
GRAND VIEW PALACE YACHT CLUB, INC.



Principal Place of Business
**7601 E. TREASURE DRIVE
SUITE 1701
NORTH BAY VILLAGE, FL 33141**

Mailing Address
**7601 E. TREASURE DRIVE
SUITE 1701
NORTH BAY VILLAGE, FL 33141**



01192007 No Chg-NP CR2E037 (4/06)

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4. FBI Number
20-4398927

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**EDWARDS, JAMES
7601 E. TREASURE DRIVE
SUITE 1709
NORTH BAY VILLAGE, FL 33141**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$81.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EDWARDS, JAMES
STREET ADDRESS	7601 E. TREASURE DRIVE #1709
CITY-ST-ZIP	NORTH BAY VILLAGE, FL 33141
TITLE	SD
NAME	EDWARDS, CHARLES C
STREET ADDRESS	7601 E. TREASURE DRIVE #PH 107
CITY-ST-ZIP	NORTH BAY VILLAGE, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James Edwards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/07
Date

Daytime Phone #