

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011763

FILED  
Apr 16, 2009  
Secretary of State

**Entity Name:** PRESIDIO YACHT CLUB CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

124 MIRACLE STRIP PARKWAY, SW  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2153  
FORT WALTON BEACH, FL 32549 US

**New Mailing Address:**

**FEI Number:** 26-1639812

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCMICHAEL, GARY W  
323 PAGE BACON ROAD, SUITE 17  
MARY ESTER, FL 32569 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: D ( ) Delete  
Name: MCMICHAEL, GARY W  
Address: 323 PAGE BACON ROAD, SUITE 17  
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete  
Name: BAKER, RICK  
Address: 323 PAGE BACON ROAD, SUITE 17  
City-St-Zip: MARY ESTHER, FL 32569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: MCMICHAEL, GARY W  
Address: 323 PAGE BACON ROAD, SUITE 17  
City-St-Zip: MARY ESTHER, FL 32569

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, ROSS  
Address: 323 PAGE BACON ROAD, SUITE 17  
City-St-Zip: MARY ESTHER, FL 32569

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 W. MCMICHAEL

PRES

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date