2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006389

Entity Name: CIRCLE YACHT CLUB SOUTH, INC.

FILED Mar 24, 2009 Secretary of State

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

2805 E OAKLAND PARK BLVD SUITE 402 FT LAUDERDALE, FL 33306

Current Mailing Address: New Mailing Address:

2805 E OAKLAND PARK BLVD SUITE 402 FT LAUDERDALE, FL 33306

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 333114132 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 SOKOLOW, ELLIOT Name: Name: 2805 E OAKLAND PARK BLVD SUITE 402 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ROTFIELD, THOMAS Name: Address: 2805 E OAKLAND PARK BLVD SUITE 402 Address: City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: Title: () Delete Title: () Change () Addition BATTS, NORLIZA Name: Name: 2805 E OAKLAND PARK BLVD SUITE 402 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MAGUIRE, JERRY Name: 2805 E OAKLAND PARK BLVD SUITE 402 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: Title: () Delete Title: () Change () Addition FOSTER, JERRY Name: Name: 2805 E OAKLAND PARK BLVD SUITE 402 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33306 City-St-Zip: Title: () Delete Title: () Change () Addition KALMENSON, LEONARD Name: Name: Address: 2805 E OAKLAND PARK BLVD SUITE 402 Address: FT LAUDERDALE, FL 33306 City-St-Zip: 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: NORLIZA BATTS S 03/24/2009