

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006389

**FILED**  
**Mar 02, 2012**  
**Secretary of State**

**Entity Name:** CIRCLE YACHT CLUB SOUTH, INC.

**Current Principal Place of Business:**

5620 N OCEAN DR  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

2786 SE 14 ST  
POMPANO BEACH, FL 33062

**New Mailing Address:**

**FEI Number:** 26-3076579

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAGUIRE, AIDAN G  
2786 SE 14 ST  
POMPANO BEACH, FL 33062 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: COMM  
Name: WOOD, HEATHER  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: VC  
Name: TUCKER, KERRI  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: SEC  
Name: MAGUIRE, DIANE  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: T  
Name: MAGUIRE, JERRY  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D  
Name: PEET, JOHN  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D  
Name: GROSSMAN, MIKE  
Address: 5620 N OCEAN DR  
City-St-Zip: HOLLYWOOD, FL 33019

I hereby 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 all other like empowered.

SIGNATURE: AIDAN MAGUIRE

RA

03/02/2012

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

\_\_\_\_\_  
Date