

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008413

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** OUTRIGGER CANOE CLUB OF FORT LAUDERDALE, INC.

**Current Principal Place of Business:**

736 INTRACOASTAL DRIVE  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

736 INTRACOASTAL DRIVE  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

**FEI Number:** 43-3145945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GABA, CHRISTOPHER D  
736 INTRACOASTAL DRIVE  
FORT LAUDERDALE, FL 33304 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:** VP  
**Name:** GABA, CHRISTOPHER D  
**Address:** 736 INTRACOASTAL DR  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

**Title:** VP  
**Name:** BAYLIS, ROBERT W  
**Address:** 736 INTRACOASTAL DR  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

**Title:** VP  
**Name:** COLLINS, CHRISTINE  
**Address:** 243 SW 5TH ST  
**City-St-Zip:** BOCA RATON, FL 33432 US

**Title:** VP  
**Name:** ALLEN, ANITA  
**Address:** 545 RAMBLEWOOD DR.  
**City-St-Zip:** CORAL SPRINGS, FL 33071 US

**Title:** VP  
**Name:** GEARY, MARGARET  
**Address:** 2800 NE 14TH ST.  
**City-St-Zip:** POMPANO BEACH, FL 33062 US

**Title:** VP  
**Name:** REAGAN, MIKE  
**Address:** 1531 SE 15TH ST.  
**City-St-Zip:** FORT LAUDERDALE, FL 33316 US

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:** CHRISTOPHER D. GABA

VP

04/25/2012

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

\_\_\_\_\_  
Date