

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13132 (8)

1. Corporation Name

RIVER REACH YACHT AND SOCIAL CLUB, INC.

Principal Place of Business

Mailing Address

C/O COMMODORE
949 RIVER REACH DR
FORT LAUDERDALE FL 33315
US

1350 RIVER REACH DR
APT 410
FORT LAUDERDALE FL 33315
US



2. Principal Place of Business

2a. Mailing Address

21 ~~Will Ross, Commodore~~

26 1101 River Reach Dr

22 ~~307~~

27 Suite, Apt. #, etc.

23 City & State

27 307
28 FT Lauderdale, FL

24 ~~FT Lauderdale~~

28 City & State

25 ~~33315~~

29 Zip

26 ~~US~~

30 Country

9. Name and Address of Current Registered Agent

HERNANDEZ, ALFONSO
1000 RIVER REACH DRIVE
APT 421
FT LAUDERDALE FL 33315

3. Date Incorporated or Qualified
01/23/1986

3a. Date of Last Report
07/10/1995

4. FEI Number
59-2656452

Applied For
Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name
Will Ross

82 Street Address (P.O. Box Number is Not Acceptable)
1101 River Reach Dr. Apt 307

83

84 City

FT Lauderdale, FL

85 Zip Code

33315

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Will Ross

Signature, typed or printed name of registered agent and title if applicable

Will Ross

(NOTE: Registered Agent signature required when re-instating)

6/18/96

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME HERNANDEZ, ALFONSO
STREET ADDRESS 1000 RIVER REACH DRIVE #421
CITY-ST-ZIP FT. LAUDERDALE FL 33315 ☒ DELETE

TITLE VD
NAME GUTIERREZ, FERNANDO
STREET ADDRESS 900 RIVER REACH DR #518
CITY-ST-ZIP FT LAUDERDALE FL 33315 ☒ DELETE

TITLE S
NAME REED, MAGGIE
STREET ADDRESS 1101 RIVER REACH DR APT 309
CITY-ST-ZIP FT LAUDERDALE FL ☒ DELETE

TITLE T
NAME BENEDICT, BILL
STREET ADDRESS 1301 RIVER REACH DR APT 204
CITY-ST-ZIP FT. LAUDERDALE FL ☒ DELETE

TITLE C
NAME ROBERTSON, ALBERT
STREET ADDRESS 1350 RIVER REACH DR APT 404
CITY-ST-ZIP FT. LAUDERDALE FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Commodore ☐ Change ☒ Addition

1.2 NAME Will Ross

1.3 STREET ADDRESS 1101 River Reach Dr Apt 307

1.4 CITY-ST-ZIP FT Lauderdale, FL 33315

2.1 TITLE D Rear Commodore ☐ Change ☒ Addition

2.2 NAME Lorraine Neary

2.3 STREET ADDRESS 1301 River Reach Dr. Apt. 516

2.4 CITY-ST-ZIP FT. Lauderdale, FL 33315

3.1 TITLE D Secretary ☐ Change ☒ Addition

3.2 NAME David Woods

3.3 STREET ADDRESS 1101 River Reach Dr. Apt 203

3.4 CITY-ST-ZIP FT. Lauderdale, FL 33315

4.1 TITLE D Treasurer ☐ Change ☒ Addition

4.2 NAME William Morgan

4.3 STREET ADDRESS 1350 River Reach Dr. Apt 410

4.4 CITY-ST-ZIP FT Lauderdale, FL 33315

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS 900001892399

5.4 CITY-ST-ZIP -07/12/96--01062--008

6.1 TITLE ***61.25 ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William G. Morgan 6/18/96 954-467-0008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (3/96)