

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14191

FILED
Feb 21, 2005
Secretary of State

Entity Name: HOMESTEAD BAYFRONT YACHT CLUB, INC.

Current Principal Place of Business:

NORTH CANAL DRIVE
P. O. BOX 444
HOMESTEAD, FL 330900444

New Principal Place of Business:

Current Mailing Address:

17330 SW 246 ST
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 65-0655780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMONS, BILL
662 SW 22 DRIVE
HOMESTEAD, FL 330335204 US

Name and Address of New Registered Agent:

POWELL, CHARLENE
12905 SW 116 CT.
MIAMI, FL 331763436 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: CHARLENE POWELL

02/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLEMMONS, BILL
Address: 662 SE 22 DRIVE
City-St-Zip: HOMESTEAD, FL 330335204

Title: VP () Delete
Name: MCDERMOTT, GEORGE
Address: 4623 SW 132 COURT
City-St-Zip: MIAMI, FL 331577681

Title: TD () Delete
Name: ROESCH, SHARON
Address: 17330 SW 246 ST
City-St-Zip: MIAMI, FL 33031

Title: SC () Delete
Name: MCDERMOTT, ANNEBELLE
Address: 14623 SW 132 CT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POWELL, CHARLENE
Address: 12905 SW 116 COURT
City-St-Zip: MIAMI, FL 331768354

Title: VP (X) Change () Addition
Name: MAYER, GEORGE
Address: 23405 SW 152 COURT
City-St-Zip: HOMESTEAD, FL 330322007

Title: TD (X) Change () Addition
Name: ROESCH, SHARON
Address: 17330 SW 246 ST
City-St-Zip: HOMESTEAD, FL 33031

Title: SC (X) Change () Addition
Name: KRESSLY, DAWN
Address: 19750 SW 302 ST
City-St-Zip: HOMESTEAD, FL 330302610

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON ROESCH

TD

02/21/2005

Electronic Signature of Signing Officer or Director

Date