

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14191

FILED  
Jan 17, 2006  
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:**

NORTH CANAL DRIVE  
HOMESTEAD, FL 330900444

**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:**

POWELL, CHARLENE  
12905 SW 116 CT.  
MIAMI, FL 331763436 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: PD ( ) Delete  
Name: POWELL, CHARLENE  
Address: 12905 SW 116 COURT  
City-St-Zip: MIAMI, FL 331768354

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SC (X) Change ( ) Addition  
Name: MCDERMOT, ANNABELLE  
Address: 14623 SW 132 CT  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON ROESCH

TD

01/17/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date