## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14191

FILED Feb 13, 2009 Secretary of State

Entity Name: HOMESTEAD BAYFRONT YACHT CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

NORTH CANAL DRIVE HOMESTEAD, FL 330900444

Current Mailing Address: 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: Name and Address of New Registered Agent:

GIULIANI, DAVID

514 NW 22 ST
HOMESTEAD, FL 330303170 US

ROESCH, LARRY
17330 SW 246 STREET
HOMESTEAD, FL 33031170 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: LARRY ROESCH 02/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 GIULIANI, DAVID
 Name:
 ROESCH, LARRY

 Address:
 514 NW 22 ST
 Address:
 17330 DE 246 STREET

 City-St-Zip:
 HOMESTEAD, FL 330303170
 City-St-Zip:
 HOMESTEAD, FL 33031

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 LARSON, ROBERT
 Name:
 VEGA, RAY

 Address:
 11920 SW 137 TERRACE
 Address:
 4530 SW 135 AVENUE

Address: 11920 SW 137 TERRACE Address: 4530 SW 135 AVENUE City-St-Zip: MIAMI, FL 331866039 City-St-Zip: MIAMI, FL 33157

Title: TD () Delete Title: TD (X) Change () Addition Name: ROESCH, SHARON Name: RILEY, DEANNA

Address: 17330 SW 246 ST Address: 11654 SW 91ST TERRACE

City-St-Zip: HOMESTEAD, FL 33031 City-St-Zip: MIAMI, FL 33176

Title: SC () Delete Title: SC (X) Change () Addition
Name: MCDERMOT, ANNABELLE Name: STRANDHAGEN, CLAIRE
Address: 14623 SW 132 CT

 Address:
 14623 SW 132 CT
 Address:
 24505 SW 164 AVENUE

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 HOMESTEAD, FL 33031

I hereby certify that the information supplied with this filing does not qualify 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: DEANNA RILEY TD 02/13/2009