2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

ROMANO

Apr 06, 2007 8:00 am Secretary of State **DOCUMENT # N20507** 04-06-2007 90043 002 ****61.25 HARBOUR RIDGE YACHT CLUB, INC. Principal Place of Business Mailing Address 12600 HARBOUR RIDGE BLVD 12600 HARBOUR RIDGE BLVD 40052399 PALM CITY, FL 34990-8033 US PALM CITY, FL 34990-8033 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03262007 Cha-NP CR2E037 (12/06) 4. FEI Number NOT APPLICABLE City & State Applied For City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BOYLE, MICHAEL F 1633 SWEET BAY CIR Street Address (P.O. Box Number is Not Acceptable) PALM CITY, FL 34990 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered pagent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete mir TITLE Addition Change NAME **DEFAZIO, THOMAS** NAME STREET ADDRESS 1405 LANCEWOOD TERR. STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FRANKENTHAL, LESTER NAME NAME STREET ADDRESS 1550 BUTTON BUSH CIR STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition MEANEY, GEORGE NAME NAME STREET ADDRESS 1483 SWEETBAY CT STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP MLE ☐ Defete TITLE ☐ Addition ROMANO, LOUIS NAME NAME STREET ADDRESS 2507 HOLLY LN STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP DS TITLE ☐ Delete TITLE ☐ Change ☐ Addition BOYLE, MIKE NAME STREET ADDRESS 1633 SWEET BAY CIR STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP TITLE ☐ Delete TITI F Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered. SIGNATURE: OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR