

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N26558** (9)

1. Corporation Name  
**CAT CAY YACHT CLUB, INC.**



Principal Place of Business: 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE FL 33394  
Mailing Address: 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE FL 33394

3. Date Incorporated or Qualified: 05/23/1988  
3a. Date of Last Report: 02/10/1995

2. Principal Place of Business: 21 1100 Lee Wagener Blvd. Suite, Apt. #, etc. 22 Suite 101 City & State 23 Fort Lauderdale, FL Zip 24 33315 Country 25 USA  
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

4. FEI Number: 65-0105771 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

9. Name and Address of Current Registered Agent: HARDIN, DAVID C. 500 E. BROWARD BLVD., SUITE #1950 FT. LAUDERDALE FL 33394  
10. Name and Address of New Registered Agent: 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D/S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOVERSPIKE, CARL	1.2 NAME	Davis, Charles L.
STREET ADDRESS	750 E. SAMPLE RD.	1.3 STREET ADDRESS	1001 Hillsboro Mile
CITY-ST-ZIP	POMPANO BCH. FL	1.4 CITY-ST-ZIP	Hillsboro Beach, FL 33062
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIAZ, MANUEL C	2.2 NAME	
STREET ADDRESS	23705 SW 117 AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOMESTEAD FL	2.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVIS, ROY D	3.2 NAME	BERGER, JOEL PAUL
STREET ADDRESS	BOX 489 N/A	3.3 STREET ADDRESS	42-08 Bell Boulevard
CITY-ST-ZIP	MEADOWLANDS PA	3.4 CITY-ST-ZIP	Bayside, NY 11361
TITLE	DT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINTER, FRED	4.2 NAME	
STREET ADDRESS	216 BUCKEYE TRAIL	4.3 STREET ADDRESS	
CITY-ST-ZIP	AUSTIN TX	4.4 CITY-ST-ZIP	
TITLE	DP <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ECKERT, WILLIAM I	5.2 NAME	
STREET ADDRESS	175 N HARBOUR DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	5.4 CITY-ST-ZIP	
TITLE	DS <input checked="" type="checkbox"/> DELETE	6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GOODCHILD, JOHN	6.2 NAME	Blum, Peter
STREET ADDRESS	100 PENN SQUAR EAST, 9TH FLOOR	6.3 STREET ADDRESS	2980 N. Federal Highway
CITY-ST-ZIP	PHILADELPHIA PA	6.4 CITY-ST-ZIP	Boca Raton, FL 33431

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 ECKERT  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

CR2E037 (12/95)

CAT CAY YACHT CLUB, INC.  
DOCUMENT 3 N26558

OFFICERS AND DIRECTORS CONTINUED:

D

Diaz, Manuel C.  
23705 S.W. 117 Avenue  
Homestead, FL 33032

D

Robert, Bruce G.  
8645 S. Broadway  
St. Louis, MO 63111

D

Vergopia, Salvatore  
31 Possum Trail  
Upper Saddle River, NJ 07458

D

Rockwell, S. Kent  
960 Penn Avenue, Suite 800  
Pittsburgh, PA 15222-3811

D

Morrison, R. Scott, Jr.  
Suite 100, Building 4  
902 Clint Moore Road  
Boca Raton, FL 33487

D

Palenzuela, Gonzalo  
1195 N.W. 97 Avenue  
Miami, FL 33172