
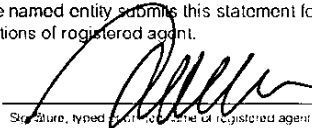


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90096 001 ****61.25

DOCUMENT # N28955 1. Entity Name DAVIS ISLAND YACHT CLUB, INC.					
Principal Place of Business 1315 SEVERN AVE TAMPA FL 33606 US			Mailing Address 1315 SEVERN AVE TAMPA FL 33606 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-0870549	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent TERRY, WILLIAM BARNETT PLAZA 101 E. KENNEDY BLVD, STE 2560 TAMPA FL 33601			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			1st MOORE CR2E037 (10/06)		
SIGNATURE  <small>Signature, typed over the name of registered agent and title if applicable.</small>			DATE		
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY ST ZIP	D KNAPP, DAVIS 5008 LONGFELLOW AVE TAMPA FL 33629	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Comm. mod. Thomas S. Dunn 513 East Davis Blvd. Tampa, FL 33606	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D DUNN, TOM 513 E DAVIS BLVD TAMPA FL 33606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Vice Commodore Kevin J. Fouché 5412 S. Crescent Dr Tampa, FL 33611	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D FOUCHE, KEVIN 84 DAVIS BLVD 608 TAMPA FL 33606-3421	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Rear Commodore Antolin Rivera 4120 West Euclid Ave Tampa, FL 33629	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D LEUGENS, GEORGE 738 S DAVIS BLVD TAMPA FL 33606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Treasurer George Haynie 463 W. Davis Blvd. Tampa, FL 33606-3841	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DT COGER, HOLLY 112 MINNEHAHA TAMPA FL 33604	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Secretary 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DS COGER, HOLLY 43 MANTINIQUE TAMPA FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	Fleet Captain Thomas J. Grimsdale 3101 W. Woodrow Ave Tampa, FL 33603	<input checked="" type="checkbox"/> Change? <input type="checkbox"/> Addition



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 or trustee 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #