

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

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90065 045 ****61.25

DOCUMENT # N33050	
1. Entity Name SEAGATE COVE YACHT CLUB, INC.	

Principal Place of Business 344 VENETIAN DRIVE STE 2 DELRAY BEACH FL 33483-6840	Mailing Address 344 VENETIAN DRIVE STE 2 DELRAY BEACH FL 33483-6840
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E037 (10/06)

4. FEI Number 65-0143007	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LYONS, H. TERRENCE 344 VENETINA DRIVE UNIT 3 DELRAY BEACH FL 33483
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT MILLER, MARTIN V 344 VENETIAN DRIVE, UNIT 2 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST MARTIN V. MILLER 344 VENETIAN DRIVE DELRAY BEACH FL 33483 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VOGT, CATHERINE P 344 VENETIAN DRIVE, UNIT 1 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LYONS, H TERRENCE 344 VENETIAN DRIVE, UNIT 3 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MORRISSETTE, PETER 344 VENETIAN DR UNIT 5 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSS, HILLARY 344 VENETIAN DR UNIT 4 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ 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: Martin V. Miller 03/01/07 561-274-4394