


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

**FILED**  
**Jul 30, 2007 8:00 am**  
**Secretary of State**

07-30-2007 90064 050 \*\*\*\*61.25

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<b>DOCUMENT # N37392</b>					
1. Entity Name DEERING BAY YACHT AND COUNTRY CLUB, INC.					
Principal Place of Business 13610 DEERING BAY DR CORAL GABLES, FL 33158 US		Mailing Address 13610 DEERING BAY DR CORAL GABLES, FL 33158 US			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0202366 Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
REISMAN, JOSEPH 1 S.E. 3RD AVE. SUITE #3050 MIAMI, FL 33131				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
				<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HOLTZMAN, LEE		NAME		
STREET ADDRESS	P.O. BOX 660070		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33266		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KALSTONE, FERNE		NAME	Siert Norris	
STREET ADDRESS	13645 DEERING BAY DR, #134		STREET ADDRESS	7341 SW 167 Street	
CITY-ST-ZIP	CORAL GABLES, FL 33158		CITY-ST-ZIP	MIAMI, FL 33157	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNKRAUT, ALLEN		NAME	Kalstone, Ferne	
STREET ADDRESS	13643 DEERING BAY DR # 272		STREET ADDRESS	13645 Deering Bay Drive #134	
CITY-ST-ZIP	CORAL GABLES, FL 33158		CITY-ST-ZIP	Coral Gables, FL 33158	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARROLL, CHARLES		NAME	Wruble, Lloyd	
STREET ADDRESS	13637 DEERING BAY DRIVE # 272		STREET ADDRESS	15303 SW 84ct	
CITY-ST-ZIP	CORAL GABLES, FL 33158		CITY-ST-ZIP	Palmetho Bay, FL 33157	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIEGEL, BARRY DR.		NAME	Crystal, Chris	
STREET ADDRESS	13643 DEERING BAY DR., #116		STREET ADDRESS	4150 Crawford Ave	
CITY-ST-ZIP	CORAL GABLES, FL 33158		CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHOMIAK, LEO		NAME		
STREET ADDRESS	14910 SW 75 CT		STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES, FL 33158		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 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: _____			Date: 7-26-07		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		