

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50018

FILED
Feb 03, 2009
Secretary of State

Entity Name: HUDSON BEACH YACHT CLUB INC.

Current Principal Place of Business:

POST OFFICE BOX 6152
HUDSON, FL 34674

New Principal Place of Business:

13139 TILLER DRIVE
HUDSON, FL 34667

Current Mailing Address:

POST OFFICE BOX 6152
HUDSON, FL 34674 US

New Mailing Address:

PO BOX 6152
HUDSON, FL 34674

FEI Number: 59-3155136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLSON, GUY E
6534 DRIFTWOOD DR
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

MICHAUX, GENE T
13913 HELEN AVE
HUDSON, FL 34667 US

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.

SIGNATURE: GENE T. MICHAUX

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MICHAUX, EUGENE
Address: 13913 HELOW AVE
City-St-Zip: HUDSON, FL 34667

Title: S () Delete
Name: DELMAR, MARY
Address: 13914 RAIE AVE.
City-St-Zip: HUDSON, FL 34667

Title: D (X) Delete
Name: KENDRICK, PAUL
Address: 11640 CONSTANCE DR
City-St-Zip: PORT RICHEY, FL 34668

Title: D (X) Delete
Name: RAY, RALPH
Address: 13036 CAVIN CT
City-St-Zip: HUDSON, FL 34667

Title: D (X) Delete
Name: ZIMMER, DAVID
Address: 14529 PEACE BLVD.
City-St-Zip: SPRING HILL, FL 34610

Title: T (X) Delete
Name: KNOWLES, MARY
Address: 7639 GREYSTONE DR
City-St-Zip: BAYONET PT, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: MICHAUX, GENE
Address: 13913 HELEN AVE
City-St-Zip: HUDSON, FL 34667

Title: VC (X) Change () Addition
Name: KENDRICK, PAUL
Address: .11640 CONSTANCE DRIVE
City-St-Zip: HUDSON, FL 34668

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENE T. MICHAUX

C

02/03/2009

Electronic Signature of Signing Officer or Director

Date