

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50189

FILED
Feb 19, 2007
Secretary of State

Entity Name: LAKE WEIR YACHT CLUB, INC.

Current Principal Place of Business:

13830 SE 145 AVE RD
EAST LAKE WEIR, FL 32133

New Principal Place of Business:

Current Mailing Address:

PO BOX 68
EASTLAKE WEIR, FL 32133 US

New Mailing Address:

FEI Number: 59-3138666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONS, JERRY
13033 SE 158TH LANE
WEIRSDALE, FL 32195 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: HEAD, MARILYN
Address: 10175 SE 174TH PL
City-St-Zip: SUMMERFIELD, FL 34492

Title: PD () Delete
Name: DE MENZES, CHARLES
Address: 500 SW 10TH ST
City-St-Zip: OCALA, FL 34474

Title: SD () Delete
Name: DE MENZES, BEITE
Address: PO BOX 4230
City-St-Zip: OCALA, FL 34478

Title: TD () Delete
Name: MINZENBERG, DEBBIE
Address: 15740 SE 140TH AVE
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: NATIONS, JERRY
Address: 13033 SE 158TH LANE
City-St-Zip: WEIRSDALE, FL 32195

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROU, MICHAEL
Address: P.O. BOX 68
City-St-Zip: EAST LAKE WEIR, FL 32133

Title: VD (X) Change () Addition
Name: ROS, MARY
Address: P.O. BOX 68
City-St-Zip: EAST LAKE WEIR, FL 32133

Title: SD (X) Change () Addition
Name: KINSMAN, JOYCE
Address: PO BOX 68
City-St-Zip: EAST LAKE WEIR, FL 32133

Title: TD (X) Change () Addition
Name: DEMENZES, CHARLES
Address: P.O. BOX 68
City-St-Zip: EAST LAKE WEIR, FL 32133

Title: D (X) Change () Addition
Name: NATIONS, JERRY
Address: P.O. BOX 68
City-St-Zip: EAST LAKE WEIR, FL 32133

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES DEMENZES

TD

02/19/2007

Electronic Signature of Signing Officer or Director

Date