

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004341

FILED
Jan 08, 2007
Secretary of State

Entity Name: RIO GRANDE YACHT CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

53 ISLE OF VENICE
FT. LAUDERDALE, FL 333011451

New Principal Place of Business:

Current Mailing Address:

53 ISLE OF VENICE
FT. LAUDERDALE, FL 333011451

New Mailing Address:

FEI Number: 65-0551044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYHEW, BRIAN
53 ISLE OF VENICE
UNIT #201
FT. LAUDERDALE, FL 33301 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: D () Delete
Name: CROKE, PETER
Address: 53 ISLE OF VENICE UNIT 201
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: STARRETT, CYNTHIA
Address: 53 ISLE OF VENICE UNIT 201
City-St-Zip: FT LAUDERDALE, FL 333011451

Title: D () Delete
Name: SWEET, FRANK
Address: 53 ISLE OF VENICE UNIT 201
City-St-Zip: FT. LAUDERDALE, FL 333011451

Title: MD () Delete
Name: MAYHEW, BRIAN
Address: 53 ISLE OF VENICE UNIT 201
City-St-Zip: FT. LAUDERDALE, FL 333011451

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BRIAN MAYHEW

MD

01/08/2007

Electronic Signature of Signing Officer or Director

Date