

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90110 029 ****70.00

DOCUMENT # N99000007272

1. Entity Name
**BLACK POINT YACHT AND SAILING CLUB,
INCORPORATED**



Principal Place of Business
**24775 SW 87 AVE
MIAMI, FL 33032**

Mailing Address
**24775 SW 87 AVE
MIAMI, FL 33032**

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



01122007

Chg-NP

CR2E037 (12/06)

4. FEI Number
65-0967608

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BURBANK, EDUARDO
10500 SW 74TH AVE
MIAMI, FL 33156**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing 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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VC** ☐ Delete
NAME **HITCHCOCK, DAN**
STREET ADDRESS **11950 SOUTHWEST 87TH AVENUE**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **C** ☒ Change ☐ Addition
NAME **HITCHCOCK, DAN**
STREET ADDRESS **11950 SOUTHWEST 87TH AVENUE**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **TD** ☐ Delete
NAME **BURBANK, EDUARDO**
STREET ADDRESS **10500 SOUTHWEST 74TH AVENUE**
CITY-ST-ZIP **MIAMI, FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **C** ☒ Delete
NAME **WALKER, SAM**
STREET ADDRESS **19505 SW 98 AVE.**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **DIFILIPPI, MICHELLE**
STREET ADDRESS **7381 SW 117 TR**
CITY-ST-ZIP **MIAMI, FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VC** ☐ Change ☒ Addition
NAME **RICK MASSO**
STREET ADDRESS **9498 HAITIAN DRIVE**
CITY-ST-ZIP **MIAMI, FL 33189**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: *Eduardo Burbank* **EDUARDO BURBANK 12/JAN/07 305-669-9793**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #