## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000001952

Entity Name: BAL HARBOUR YACHT CLUB, INC.

**Current Principal Place of Business:** 

1675 LANDS END ROAD MANALAPAN. FL 33462

## **Current Mailing Address:**

1675 LANDS END ROAD MANALAPAN, FL 33462

FEI Number: 46-5242554 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IMBESI, JOSEPH 1675 LANDS END ROAD MANALAPAN, FL 33462 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:

Electronic Signature of Registered Agent

Date

FILED Jan 27, 2016

**Secretary of State** 

CC5012290166

Officer/Director Detail:

Title PD Title VSD

Name IMBESI, JOSEPH Name IMBESI, ORLA

Address 1675 LANDS END ROAD Address 1675 LANDS END ROAD

City-State-Zip: MANALAPAN FL 33462 City-State-Zip: MANALAPAN FL 33462

Title VTD Title D

Name IMBESI, ANTHONY Name GUNTER, SONIA

Address 175 CAMDEN DR. Address 40 BROAD STREET, APT 10B

City-State-Zip: BAL HARBOUR FL 33154 City-State-Zip: NEW YORK NY 10004

Title PD Title VSD

Name IMBESI, JOSEPH Name IMBESI, ORLA

Address 1675 LANDS END ROAD Address 1675 LANDS END ROAD
City-State-Zip: MANALAPAN FL 33462 City-State-Zip: MANALAPAN FL 33462

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Name IMBESI, ANTHONY Name GUNTER, SONIA

Address 175 CAMDEN DR. Address 40 BROAD STREET, APT 10B

City-State-Zip: BAL HARBOUR FL 33154 City-State-Zip: NEW YORK NY 10004

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: ORLA IMBESI VICE PRES 01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name DOERING, AMANDA MIA

Address 305 NE 17TH AVE

City-State-Zip: FT. LAUDERDALE FL 33301