



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011**

**Filing Period:** June 1 - June 30 • **Filing Fee:** \$20.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>131407</b>		2. Name of Corporation <b>AMERICAN YACHT CHARTER ASSOCIATION</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Corporate address in Rhode Island - Street Address <b>18 MARKET SQUARE</b>		City <b>Newport</b>	Zip <b>02840</b>
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <b>INTEGRITY AND COMMUNICATIONS AMONG MEMBERS OF THE YACHT CHARTER INDUSTRY. TO INCREASE PROFESSIONALISM,</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>PAULA JAN HENRY</b>			Vice President Name <b>BEVERLY PARSONS</b>		
Street Address <b>1800 So Pal 10th Ave.</b>			Street Address <b>4918 No. Harbor Drive</b>		
City <b>Ft Lauderdale</b>	State <b>Florida</b>	Zip <b>33316</b>	City <b>SAN DIEGO</b>	State <b>CA</b>	Zip <b>92106</b>
Secretary Name <b>ANN LANDRY</b>			Treasurer Name <b>BRUCE BRAKENHOFF</b>		
Street Address <b>17 ROSE DRIVE</b>			Street Address <b>2 MARINA PLAZA, GOAT IS.</b>		
City <b>Ft. Lauderdale</b>	State <b>Florida</b>	Zip <b>33316</b>	City <b>Newport</b>	State <b>R.I</b>	Zip <b>02840</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name <b>BARBARA DAWSON</b>			Director Name <b>CANDY ISDALE</b>		
Street Address <b>450 ROYAL PALM WAY</b>			Street Address <b>120 BLOOMINGDALE RD</b>		
City <b>Palm Beach</b>	State <b>FL</b>	Zip <b>33480</b>	City <b>White Plains</b>	State <b>NY</b>	Zip <b>10605</b>
Director Name <b>DJ PARKER</b>			Director Name <b>GINA ROBERTSON</b>		
Street Address <b>209 SE 21st Street</b>			Street Address <b>757 SE 17th St, Suite 500</b>		
City <b>Ft. Lauderdale</b>	State <b>FL</b>	Zip <b>33316</b>	City <b>Ft Lauderdale</b>	State <b>FL</b>	Zip <b>33316</b>
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

**FILED**

File Date **JUN 07 2011**

Check No. **By mnc**

By: **309**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **Bruce R. Brakenhoff** Date **6/5/11**

Print or Type Name of Officer  
**Treasurer**

Title of Officer