

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700739

1. Entity Name

CARLOUEL YACHT CLUB INC

Principal Place of Business

JOHN T MCMULLEN
1091 ELDORADO
CLEARWATER FL 33767-003
US

Mailing Address

JOHN T MCMULLEN
1091 ELDORADO
CLEARWATER FLA 33767-1007
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0558704

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

CLINE, HARRY S
1091 ELDORADO
CLEARWATER FL 34630

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

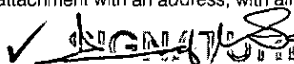
10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	MARIANI, TIMOTHY	
STREET ADDRESS	1550 S HIGHLAND AVENUE	
CITY-ST-ZIP	CLEARWATER FL 33756	
TITLE	ST	☐ Delete
NAME	SIBSON, JAMES W	
STREET ADDRESS	445 COUNTRY CLUB RD	
CITY-ST-ZIP	BELLEAIR FL 33756	
TITLE	VD	☐ Delete
NAME	LAMBERT, HARRY W	
STREET ADDRESS	437 GARDENIA STREET	
CITY-ST-ZIP	BELLEAIR FL 33756	
TITLE	RD	☐ Delete
NAME	DAYTON, KENNETH A	
STREET ADDRESS	210 SARASOTA RD	
CITY-ST-ZIP	BELLEAIR FL 33756	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☐ Addition
NAME	LAMBERT, HARRY W.	
STREET ADDRESS	437 GARDENIA ST.	
CITY-ST-ZIP	BELLEAIR, FL. 33756	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	☐ Change ☐ Addition
NAME	DAYTON, KENNETH A.	
STREET ADDRESS	210 SARASOTA RD.	
CITY-ST-ZIP	BELLEAIR, FL. 33756	
TITLE	RD	☐ Change ☐ Addition
NAME	WILLSEY, GREG.	
STREET ADDRESS	1106 PALM VIEW AVE.	
CITY-ST-ZIP	BELLEAIR, FL. 33756	
TITLE		☐ Change ☐ Addition
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 exemption stated in Section 119.07(3)(i), 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90035 031 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)