

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
 04-17-2001 90147 032 ****61.25

0034943

DOCUMENT # 710777

1. Entity Name

SOMBRERO COUNTRY CLUB, INC.

Principal Place of Business

Mailing Address

**4000 SOMBRERO BLVD.
 MARATHON FL 33050
 US**

**P.O. BOX 500969
 MARATHON FL 33050-0969
 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

59-1142228

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

**HEFFERNAN, W.J. J
 2975 OVERSEAS HIGHWAY
 MARATHON FL 33050**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
 NAME **PALGUTA, ROBERT**
 STREET ADDRESS **721 W. OCEAN DR., APT. 1**
 CITY-ST-ZIP **KEY COLONY BEACH FL 33051**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **JAMES T COLBY**
 STREET ADDRESS **117 COCO PLUM PR.**
 CITY-ST-ZIP **MARATHON, Florida 33050**

TITLE **VP** ☐ Delete
 NAME **FUNK, LOUIS JR**
 STREET ADDRESS **1025 W. OCEAN DRIVE**
 CITY-ST-ZIP **KEY COLONY BEACH FL 33051-0855**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **JOHN TESINSKY**
 STREET ADDRESS **121 SADDILLA DR.**
 CITY-ST-ZIP **PSLAMARADA, Florida 33036**

TITLE **S** ☐ Delete
 NAME **DANIELS, WILLIAM**
 STREET ADDRESS **2341 SOMBRERO BLVD.**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE **TREASURER** ☐ Change ☒ Addition
 NAME **RICK BEMIN**
 STREET ADDRESS **27790 KYLE BLVD**
 CITY-ST-ZIP **BIG PINE KEY, Florida 33043**

TITLE **D** ☐ Delete
 NAME **BAUMGARTNER, RAY**
 STREET ADDRESS **100 TINGLER ISLAND**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **LYNN VOIT**
 STREET ADDRESS **115 SAGUANO LANE**
 CITY-ST-ZIP **MARATHON, Florida 33050**

TITLE **D** ☐ Delete
 NAME **HALL, EDWARD**
 STREET ADDRESS **P.O. BOX 500376**
 CITY-ST-ZIP **MARATHON FL 33050**

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

TITLE **D** ☒ Delete
 NAME **BECKER, ROBERT H**
 STREET ADDRESS **241 - 12TH STREET**
 CITY-ST-ZIP **KEY COLONY BEACH FL 33051-0194**

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)(l), 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

2/16/01

Date

305-743-2887

Daytime Phone #

CR2E037 (10/00)