

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714130

1. Entity Name

GOLF CLUB CONDOMINIUM, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90074 007 ****61.25

Principal Place of Business

Mailing Address

201 7TH STREET
P.O. BOX 548
KEY COLONY BEACH FL 33051

201 7TH STREET
P.O. BOX 548
KEY COLONY BEACH FL 33051

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2655336

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BREWSTER, WM.
201 7TH STREET
UNIT #3
KEY COLONY BEACH FL 33051

Name **MILKOVICH MIKE**

Street Address (P.O. Box Number is Not Acceptable)

201 7TH ST.

UNIT # 7

City **KEY COLONY BEACH FL** Zip Code **33051**

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 **TD** ☐ Delete
NAME **BECKER, ALBERT E.**
STREET ADDRESS **7TH. ST. 201 APT.8**
CITY-ST-ZIP **KEY COLONY BCH, FL 00000**

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

TITLE **PD** ☒ Delete
NAME **BREWSTER, WM.**
STREET ADDRESS **7TH. ST. 201 APT#3**
CITY-ST-ZIP **KEY COLONY BCH, FL 00000**

TITLE **PD MILKOVICH MIKE** ☒ Change ☒ Addition
NAME
STREET ADDRESS **7TH ST. 201 APT # 7**
CITY-ST-ZIP **KEY COLONY BEACH FL 33051**

TITLE **SD** ☒ Delete
NAME **PHILLIPS, STEVE**
STREET ADDRESS **201 7TH ST APT #5**
CITY-ST-ZIP **KEY COLONY BEACH FL**

TITLE ☒ Change ☒ Addition
NAME **E. Denise Lackhove**
STREET ADDRESS **201 7th St. Unit 2**
CITY-ST-ZIP **KEY Colony Beach, Fl. 33051**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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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:

ALBERT E. BECKER *Albert E. Becker J/fo* **305-284-0041**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)