2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 722481

City-St-Zip:

Entity Name: THE YACHT & COUNTRY CLUB. INC

FILED Apr 12, 2002 8:00 AM Secretary of State

_many man		THE COOKING CLOB, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3883 S.E. I STUART, I	FAIRWAY EAS FL 34997	T				
Current Mailing Address:			New Maili	New Mailing Address:		
3883 S.E. I STUART, I	FAIRWAY EAS FL 34997	T				
FEI Number:	59-1426270	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
KAPLAN, MICHAEL L 3883 SE FAIRWAY E STUART, FL 34997 US			3883 SÉ F.	NOVAK, DAVID 3883 SE FAIRWAY E STUART, FL 34997 US		
	named entity s of Florida.	submits this statement for the p	urpose of changing i	its registered office or registered agent, or both,		
SIGNATURE: DAVID NOVAK				04/12/2002		
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () PALMER, WAL 4033 SE FAIRV STUART, FL 34	/AY EAST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VD () MCNEIL, JAME 3231 SE COUR STUART, FL 34	T DRIVE	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition DIRIENZO, MARIO J 3182 SE FAIRWAY WEST STUART, FL 34997		
Title: Name: Address: City-St-Zip:	TD () COPELAND, EF 3422 SE FAIRV STUART, FL 34	/AY WEST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD () CURRAN, ANN 4114 SE FAIRV STUART, FL 34	/AY EAST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	()	Delete	Title: Name: Address:	VD () Change (X) Addition FITZGERALD, MICHAEL J 4053 SE FAIRWAY EAST		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

City-St-Zip:

STUART, FL 34997

SIGNATURE: WALTER PALMER PD 04/12/2002