

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727202

1. Entity Name

SOUTHBAY YACHT AND RACQUET CLUB OWNERS ASSOCIATION, INC.

Principal Place of Business

**1400 SOUTHBAY DRIVE
OSPREY FL 34229-6112**

Mailing Address

**1400 SOUTHBAY DRIVE
OSPREY FL 34229-6112**

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 **59-1853018**

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

**BECKER & POLIAKOFF, P.A.
630 S ORANGE AVENUE
SARASOTA FL 34236**

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 **PATTERSON, CAL**
STREET ADDRESS **1265 FLYING BRIDGE LANE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE ☐ Change ☒ Addition
NAME **Mitchell, David** President
STREET ADDRESS **182 Harbor House Dr.**
CITY-ST-ZIP **Osprey, FL. 34229**

TITLE **VP** ☒ Delete
NAME **MAY, DOUG**
STREET ADDRESS **1537 SOUTHBAY DRIVE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE ☐ Change ☒ Addition
NAME **Grunow, Robert** V/Pres
STREET ADDRESS **453 Yacht Harbor Dr.**
CITY-ST-ZIP **Osprey, FL. 34229**

TITLE **S** ☐ Delete
NAME **KERNS, SHIRLEY**
STREET ADDRESS **241 LOOKOUT POINT**
CITY-ST-ZIP **OSPREY FL 34229**

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

TITLE **T** ☐ Delete
NAME **BERTLESBECK, BOB**
STREET ADDRESS **1610 SOUTHBAY DRIVE**
CITY-ST-ZIP **OSPREY FL 34229**

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

TITLE **D** ☒ Delete
NAME **DAILEY, LOUISE**
STREET ADDRESS **497 YACHT HARBOR DRIVE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE ☐ Change ☒ Addition
NAME **Harris, Scott** Dir.
STREET ADDRESS **1532 Southbay Dr.**
CITY-ST-ZIP **Osprey, FL. 34229**

TITLE **D** ☒ Delete
NAME **GELDI, JACK**
STREET ADDRESS **172 YACHT HARBOR DRIVE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE ☐ Change ☒ Addition
NAME **Jungemann, Luther** Dir.
STREET ADDRESS **217 Windward Dr.**
CITY-ST-ZIP **Osprey, FL. 34229**

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 OF David Mitchell, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-966-4237



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)