

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729653

1. Entity Name

LAUDERDALE SMALL BOAT CLUB, INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90013 003 ****61.25

Principal Place of Business

Mailing Address

1740 S.W. 42ND STREET
 FORT LAUDERDALE FL 33315

1740 S.W. 42ND STREET
 FORT LAUDERDALE FL 33315-3552

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0873268

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

HEAD C.P.A., WILLIAM
 8751 W BROWARD BLVD
 PLANTATION FL 33324

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 SD ☐ Delete
 NAME LENZ, CARL
 STREET ADDRESS 9142 A SW 23 STREET
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE PD ☐ Delete
 NAME HODGES, WELDON
 STREET ADDRESS 2400 N 62 AVE
 CITY-ST-ZIP HOLLYWOOD FL 33024

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

TITLE TD ☐ Delete
 NAME TURNER, WILLIAM R.
 STREET ADDRESS 1089 NW 161 AVE
 CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 5170 S.W. 21 COURT
 CITY-ST-ZIP Plantation, FL 33317-6052

TITLE V ☒ Delete
 NAME HAMILTON, MARK
 STREET ADDRESS 215 W STATE RD 84
 CITY-ST-ZIP FT LAUDERDALE FL 33315

TITLE ☒ Change ☒ Addition
 NAME
 STREET ADDRESS Prochaska, George
 CITY-ST-ZIP 7520 S.W. 42 COURT
 Davie, FL 33314

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
 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 of William Lenz
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-00 954-359-7659
 Date Daytime Phone #

CR2E037 (9/99)