2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 03, 2001 8:00 am s Secretary of State **DOCUMENT # 758318** 1. Entity Name 04-03-2001 90115 005 ****61 25 LAKE ARROWHEAD BUSINESS AND SOCIAL CLUB, INC. 🔑 Principal Place of Business Mailing Address 2860 RUISNESS HI 3162 RUNNING DEER N FT MEYERS FL 33917 N FT MEYERS FL 33917 HS HS 3. Mailing Address 2. Principal Place of Business 2860 Bus. 4 2860 Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For MYERS 65-0103822 Not Applicable Country **\$8.75** Additional 5. Certificate of Status Desired 45A Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent CAROL M. LANEY Street Address (P.O. Box Number is Not Acceptable CAMP, BETSY 3171 RAIN DANCE 3162 RUNNING DEER DRIVE N FT MEYERS FL 33917 MYERS 33917 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 the if applicable **\$5.00** May Be 9. Election Campaign Financing Make Check Payable to FILE NOW: Trust Fund Contribution. **Department of State** FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Addition Change Delete TITI F TITLE DILLING, HENRY NAME NAME STREET ADDRESS STREET ADDRESS 3113 OLD FARMHOUSE CITY-ST-ZIP CITY-ST-7IP N FT MEYERS FL 33917 ☐ Addition Change □ Delete TITLE TITLE SMITH, BERNICE NAME NAME STREET ADDRESS STREET ADDRESS 3154 LONGVIEW LANE CITY-ST-ZIP CITY-ST-ZIP N FT MEYERS FL 33917 Change 50 ☐ Addition SD Delete TITLE TITLE CAROL M. LANEY 3171 RAINDANCE LANE CAMP. BETSY NAME NAME 3162 RUNNING DEER DRIVE STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NORTH FORT MYERS, FL 33917 N. FT. MYERS FL 33917 Change TD ☐ Delete TITLE ☐ Addition TITLE LYNCH, LOIS NAME NAME STREET ADDRESS STREET ADDRESS 3053 LONGVIEW LN CITY-ST-ZIP CITY-ST-ZIP N FT MEYERS FL 33917 DKAROL FISCHER Y Change D Delete TITLE ☐ Addition TITLE MOWKA, JERRY NAME NAME 2964 LONGVIEW LN. STREET ADDRESS STREET ADDRESS 3158 LINWOOD DRIVE N. FT. MYERS, FL CITY-ST-ZIP CITY-ST-ZIP N FT MEYERS FL 33917 TITLE Delete TITLE ☐ Addition NAME KELLER, MARY LOU NAME PICARD Naomi 3072 LONGVIEW LN. STREET ADDRESS STREET ADDRESS 2953 LONGVIEW LN CITY-ST-ZIP CITY-ST-ZIP N. FT. MYERS, FL 33917 NORTH FT. MYERS FL 33917 12. I hereby certify that the information supplied with this filling 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.