

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 760677

FILED
Feb 13, 2002 8:00 AM
Secretary of State

Entity Name: ADIOS GOLF CLUB, INC.

Current Principal Place of Business:

7740 NW 39TH AVE
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 0310
COCONUT CREEK, FL 33097

New Mailing Address:

FEI Number: 59-2195728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, WILLIAM F.
4875 N. FEDERAL HWY. 10TH FLOOR
FT. LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEPHENS, EDWARD B
Address: 2600 N.E. 40TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: VPD () Delete
Name: NEWMAN, THOMAS
Address: 201 SE 24TH AVE
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: FORMICHELLA, MARIO
Address: 2000 S. OCEAN BLVD., #11A
City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete
Name: TUCCILLO, ANTHONY
Address: 4301 N OCEAN BLVD., #201
City-St-Zip: BOCA RATON, FL 33431

Title: V (X) Delete
Name: ADDEO, RICHARD
Address: 60 ST JAMES PL
City-St-Zip: STATEN ISLAND, NY 10304

Title: P (X) Delete
Name: GIORGIO, ANTHONY
Address: 7114 VIA FIRENZE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LUCCI, MICHAEL G
Address: 3184 MIDDLEBELT
City-St-Zip: BLOOMFIELD, MI 48098

Title: VPD (X) Change () Addition
Name: LEVITETZ, JEFFREY
Address: 3223 N. OCEAN BLVD.
City-St-Zip: GULFSTREAM, FL 33483

Title: TD (X) Change () Addition
Name: MCCARTHY, MICHAEL J
Address: 2921 MIDDLEBURY LANE
City-St-Zip: BLOOMFIELD HILLS., MI 48301

Title: SD (X) Change () Addition
Name: MARCOFF, PETE
Address: 3757 WEYMOUTH WOODS DRIVE
City-St-Zip: MEDINA, OH 44256

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MICHAEL LUCCI

P

02/13/2002

Electronic Signature of Signing Officer or Director

_____ Date