

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90393 022 \*\*\*\*61.25

**DOCUMENT # N00550**  
 1. Entity Name  
**THE RACQUET CLUB OF EL CONQUISTADOR, INC.**

Principal Place of Business      Mailing Address  
**4511 BAY CLUB DR.**      **4511 BAY CLUB DR.**  
**BRADENTON FL 34205**      **BRADENTON FL 34210-4030**  
**US**      **US**

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

6. Name and Address of Current Registered Agent  
~~FARRANGE, ROBERT A.~~  
~~1801-3 AVE. W. STE 600~~  
~~BRADENTON FL 34205~~

DAMIAN M. OZARK  
 2808 MANATEE AVE W  
 BRADENTON FL 34205



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2372337**      Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent  
 Name **DAMIAN M. OZARK**  
 Street Address (P.O. Box Number is Not Acceptable) **2808 MANATEE AVE. W.**  
~~BRADENTON~~  
 City **Bradenton**      FL      Zip Code **34205**

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 *Damian Ozark* **DAMIAN M. OZARK**      DATE **4-21-00**  
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 NAME STREET ADDRESS CITY-ST-ZIP	<b>DP</b> <del>KING, BILL</del> <del>7618 AVENIDA MODERN</del> <del>BRADENTON FL 34210</del> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>DP</del> <del>KING, BILL</del> <del>3818 AVENIDA MADERA</del> <del>BRADENTON FL</del> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>DVP</del> <b>ILDERTON, BOB</b> <b>6707 THRID STREET WEST</b> <b>BRADENTON FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>DS</del> <b>SMITH, JIM</b> <b>5823 LOS VERDES CT</b> <b>BRADENTON FL 34210</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVPS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT</b> <b>Harris, Owen</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>4220 Presidential Ave CNE.</b> <b>Bradenton, FL 34203</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *DAMIAN M. OZARK* **REQUIRED**      Date **4/21/2000**      Daytime Phone # **(941) 753-1512**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR