

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2001 8:00 am
Secretary of State

0074911

DOCUMENT # N00550

1. Entity Name

THE RACQUET CLUB OF EL CONQUISTADOR, INC.

Principal Place of Business

4511 BAY CLUB DR.
 BRADENTON FL 34205
 US

Mailing Address

4511 BAY CLUB DR.
 BRADENTON FL 34205
 US

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

59-2372337

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OZARK, DAMIAN M
2808 MANATEE AVENUE WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

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

TITLE ~~DP~~ Delete
 NAME ~~ILDERTON, BOB~~
 STREET ADDRESS ~~6767 THIRD STREET WEST~~
 CITY-ST-ZIP ~~BRADENTON FL~~

TITLE ~~DVPS DP~~ Delete
 NAME ~~SMITH, JIM~~
 STREET ADDRESS ~~5823 LOS VERDES CT~~
 CITY-ST-ZIP ~~BRADENTON FL 34210~~

TITLE ~~DT~~ Delete
 NAME ~~HARRIS, OWEN~~
 STREET ADDRESS ~~4220 PRUDENTIAL AVENUE CIRCLE EAST~~
 CITY-ST-ZIP ~~BRADENTON FL 34203~~

TITLE ~~DVP~~ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ~~DP~~ Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ~~DVP~~ Change Addition
 NAME ~~Charles Robbins~~
 STREET ADDRESS ~~4005 Archida Madera~~
 CITY-ST-ZIP ~~Bradenton FL 34210~~

TITLE Change Addition
 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-01
 Date

941-753-8512
 Daytime Phone #

CR2E037 (10/00)



DO NOT WRITE IN THIS SPACE