

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000004866

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: PLAYERS CLUB AT BAYSIDE LAKE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

517-A NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935

New Principal Place of Business:

2012 MUIRFIELD WAY SE
PALM BAY, FL 32909 US

Current Mailing Address:

517-A NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935

New Mailing Address:

2012 MUIRFIELD WAY SE
PALM BAY, FL 32909 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, JOEL S
47 WEST NEW HAVEN AVE.
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

MCWILLIAMS, MICHAEL E
2012 MUIRFIELD WAY SE
PALM BAY, FL 32909 US

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: MICHAEL E. MCWILLIAMS

04/26/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: MCWILLIAMS, MICHAEL
Address: 517-A NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: D (X) Delete
Name: MCWILLIAMS, ELLEN
Address: 517-A NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: MCWILLIAMS, JOAN
Address: 517-A NORTH HARBOR CITY BLVD.
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: MCWILLIAMS, MICHAEL
Address: 2012 MUIRFIELD WAY SE
City-St-Zip: PALM BAY, FL 32909 US

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

Title: D (X) Change () Addition
Name: MCWILLIAMS, JOAN
Address: 2012 MUIRFIELD WAY SE
City-St-Zip: PALM BAY, FL 32909 US

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 MCWILLIAMS

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04/26/2002

Electronic Signature of Signing Officer or Director

Date