2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13513 1. Entity Name PLAYERS CLUB AT SUNTREE, INC. 04-04-2000 90028 008 ****61.25 Principal Place of Business Mailing Address SUNTREE PROFESSIONAL CENTER, STE. 6 SUNTREE PROFESSIONAL CENTER, STE. 8 6550 N. WICKMAN RD. 6550 N. WICKMAN RD. MELBOURNE FL 32940 MELBOURNE FL 32940-2008 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2682713 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ----7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) THOMPSON, JEFFREY G SUNTREE PROFESSIONAL CENTER, STE. 6 4 6550 N. WICKHAM RD. City . 45 Zip Code **MELBOURNE FL 32940** FI 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 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Pavable to Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10, 11. TITLE TITLE ☐ Change Delete Delete PRESIDENT Addition HALL, JOANN NAME NAME RICHARD SHORR 77 Y PLAYERS CT MELBOURNE FL 32940 STREET ADDRESS STREET ADDRESS 715 FAIRWAY DRIVE CITY-ST-7IP MELBOURNE FL 32940 CITY- ST-718 TREASUREL TITLE ۷D Delete NAME RUSSO, CHRIS NAME STREET ADDRESS STREET ADDRESS 762 PLAYERS COURT CITY-ST-ZIP CITY-SI-ZIP **MELBOURNE FL 32940** VICE PRESIDENT TITLE Delete. TITLE ☐ Change **12** Addition CAREY, BOB NAME NAME MICHAEL FRESA STREET ADDRESS STREET ADDRESS 746 PLAYERS CT 728 FAIRWAY DR MUSIBOURNE FL 32940 CITY-ST-ZIE CITY-ST-ZIP MELBOURNE FL 32940 TITLE TITLE SECRETARY Delete STANTON KELT 768 PLAYERS CT NAMÉ CONNICK, WARNER NAME STREET ADDRESS STREET ADDRESS 738 FAIRWAY DR CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE FL 32940** MECBOURILE SD Delete DIRECTOR ☐ Addition TITLE TITLE DOROTHY BARBOUR NAME FALCONE, VERI NAME 719 PLAYERS CT STREET ADDRESS STREET ADDRESS 710 FAIRWAY DRIVE CITY - ST-7IP CITY-ST-7IP MELBOURNE FL 32940 MELBOURILE TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-IP 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:

FILLD
May 22, 2000 8:00 am
Secretary of State
04.04.2000.00020.000 ************