

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90030 005 ****61.25

0051338

DOCUMENT # N18736

1. Entity Name

PALM BEACH COUNTY 10-13 CLUB, INC.

Principal Place of Business

P.O. BOX 1511
BOYNTON BEACH FL 33435
US

Mailing Address

P.O. BOX 1511
BOYNTON BEACH FL 33435
US**901448**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0026394

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
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)

City

FL

Zip Code

ROTHSCHILD, THEODORE
650 SNUG HARBOR DR. G-402
BOYNTON BEACH FL 33435

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 \$61.259. 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	P	☐ Delete
NAME	ROTHSCHILD, THEODORE	
STREET ADDRESS	650 SNUG HARBOR DR G 402	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	V	☐ Delete
NAME	DIFIGLIA, DOMINICK	
STREET ADDRESS	4611 VESPASIAN COURT	
CITY-ST-ZIP	LAKE WORTH FL 33463	
TITLE	S	☐ Delete
NAME	ROBERTS, DENNIS G SR.	
STREET ADDRESS	921 MULBERRY ST	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	T	☐ Delete
NAME	FINNIN, EUGENE	
STREET ADDRESS	621 E. WOOLBRIGHT RD.	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	D	☐ Delete
NAME	RALPH, WILLIAM J	
STREET ADDRESS	400 N. FEDERAL HWY #611	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	D	☐ Delete
NAME	MOONEY, WILLIAM J	
STREET ADDRESS	8999 INDIAN RIVER	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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:**Eugene Finnin**
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/01 561-737-1003

CR2E037 (10/00)