2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 8:00 am Escretary of State DQCUMENT # N9500004339 NEW YORK SOCIAL CLUB OF PALM COAST, INC. 02-13-2001 90038 027 ****61.25 Principal Place of Business Mailing Address ITALIAN-AMERICAN CLUB P.O. BOX 353519 45 OLD KINGS RD. PALM COAST FL 32135-3519 PALM COAST FL 32137 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 65-0191133 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARKEN - FLORDON-Street Address (P.O. Box Number is Not Acceptable) CUNNANE, JOSEPH J. 21 ELDER DRIVE 117 FORRESTER PALM COAST FL 32164 Zip Code 32137 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 **FILE NOW:** 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. П FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS 10: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITI F Delete TITLE MFOREIN FLANAGAN Change ☐ Addition CUNNANE, JOSEPH J. NAME NAME IT FORRESTER PL STREET ADDRESS 21 ELDER DRIVE STREET ADDRESS Paun CONST FL 37137 CITY-ST-ZIP PALM COAST FL 32164 CITY-ST-ZIP SI FLINT HILL LA $\overline{\mathsf{W}}$ TITLE Delete TITLE ☐ Addition PINES, GEORGE NAME NAME 85 WHISPERING PINE DR STREET ADDRESS STREET ADDRESS PALM CONT FL 37137 CITY-ST-7IP PALM COAST FL 32137 CITY-ST-ZIP TD **Z** Delete TITLE TITLE Change Addition DENIS - CRUEDEN BASES, FRANK P NAME NAME STREET ADDRESS 23 CLEARVIEW COURT S STREET ADDRESS DIMM COIST FL 37164 CITY-ST-7IP PALM COAST FL 32137 CITY-ST-7IP HENRIETIA EPSTEIN Change Ad 20 Ni Claridge Ct. P.C. 32137 4460815 Delete TITLE BASES, FRAN NAME NAME STREET ADDRESS 23 CRESCENT CT N STREET ADDRESS CITY-ST-ZIP PALM COAST FL 32137 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition BOLL RAMIRATE AMMIRATA, BELLA NAME NAME 33 CHRISTOPHERCT. 33 CHRISTOPHER COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM COAST FK 32137 Parm CONSTFL 3 2137 CITY-ST-7IP

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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD

FLANAGAN, MAUREEN

117 FORRESTER PLACE

PALM COAST FL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

2/7/4

98 WENN FIELD DR

PALM COBS! FL 37164

Change

☐ Addition