2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # **N95000004603** Apr 25, 2000 8:00 am Secretary of State 1. Entity Name MIRAMAR BEACH AND TENNIS CLUB, INC. 04-25-2000 90077 031 ****61.25 Mailing Address Principal Place of Business 105 SHELL DRIVE 105 SHELL DRIVE **BONITA SPRINGS FL 34134** BONITA SPRINGS FL 34134-8584 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FE! Number 65-0604776 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent. Name Street Address (P.O. Box Number is Not Acceptable) EDELBROCK, KENNETH 105 SHELL DRIVE **BONITA SPRINGS FL 34134** Zip Code City 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. DATE d or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE EDELBROCK, KENNETH R NAME NAME STREET ADDRESS STREET ADDRESS 269 BAREFOOT BEACH BOULEVARD, #404 CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** ☐ Delete TITLE ☐ Change Addition TITLE NAME SANDER, ROBERT NAME 260 BAREFOOT BEACH BOULEVARD, #401 STREET, ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134** ☐ Delete TITLE ☐ Change ☐ Addition TITLE RAUSCHELBACH, WILLIAM NAME NAME 265 BAREFOOT BEACH BOULEVARD, #2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BONITA SPRINGS FL 34134 VPD** ☐ Change ☐ Addition ☐ Delete TITLE TITI F GARESCHE, EDMOND NAME NAME STREET ADDRESS 748 SAINT GEORGES COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34110 **VPD** ☐ Change Addition TITLE ☐ Delete TITLE DAWE, FRANK NAME NAME STREET ADDRESS 264 BAREFOOT BEACH BOULEVARD, #504 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BONITA SPRINGS FL 34134 □ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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