

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90103 018 ****61.25

DOCUMENT # N97000000167

1. Entity Name

**THE SWISS AMERICAN SOCIETY OF THE GOLD COAST, IN
C.**

Principal Place of Business

Mailing Address

**17650 OAKWOOD AVE
BOCA RATON FL 33487
US****17650 OAKWOOD AVE
BOCA RATON FL 33487
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0710502

Applied For

Not Applicable

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

**MARTI, ROLF
17650 OAKWOOD AVENUE
BOCA RATON FL 33487**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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	PD	☐ Delete
NAME	MARTI, ROLF	
STREET ADDRESS	17650 OAKWOOD AVE	
CITY-ST-ZIP	BOCA RATON FL 33487	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VPD	☐ Delete
NAME	HARRIS, ROSEMARY	
STREET ADDRESS	1975 NE 6TH ST	
CITY-ST-ZIP	DEERFIELD BCH FL 33441	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	TD	☐ Delete
NAME	MEIER, CHRISTIAN	
STREET ADDRESS	4799 NW 96TH DR	
CITY-ST-ZIP	CORAL SPRINGS FL 33076	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SD	☐ Delete
NAME	JETZER, JULIE	
STREET ADDRESS	1106 SE 10TH TERRACE	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SD	☐ Delete
NAME	BILDIK-KEVORK, THERESA	
STREET ADDRESS	1231 VAN BUREN ST	
CITY-ST-ZIP	HOLLYWOOD FL 33019	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Delete
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTIAN MEIER

Date

Daytime Phone #

3/12/02 776-1606 X119

CR2E037 (9/01)