

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000042251

1. Entity Name

NORTHSTAR CAPITAL MANAGEMENT, INC.

FILED
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90507 008 ***150.00

Principal Place of Business
3980 S.E. OLD ST. LUCIE BLVD.
STUART FL 34996

Mailing Address
3980 S.E. OLD ST. LUCIE BLVD.
STUART FL 34996

2. Principal Place of Business
4400 PGA Boulevard
Suite, Apt. #, etc.
Suite 600

3. Mailing Address
4400 PGASBoulevard
Suite, Apt. #, etc.
Suite 600lock #1



DO NOT WRITE IN THIS SPACE

City & State
Palm Beach Gardens, FL

City & State
Palm Beach Gardens, FL

4. FEI Number
65-1002630

Applied For
Not Applicable

Zip
33410

Country
USA

Zip
33410

Country
USA

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

COOKE, BRIAN J ESQ.
C/O ARNSTEIN & LEHR
515 NORTH FLAGLER DR., STE. 600
WEST PALM BEACH FL 33401

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MERGLER, KENT
3980 S.E. OLD ST. LUCIE BLVD.
STUART FL 34996 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P / / D
Mergler, Kent
3980 S.E. Old St. Lucie Blvd.
Stuart, FL 34996 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sr. V / T / D
Jacobsen, Robert
2858 Timbercreek Circle
Boca Raton, FL 33431 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V- / D
Mergler, Stephen
686 Lakewoode Circle East
Delray Beach, FL 33445 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Shea, Meg
11518 Landing Place #A-3
North Palm Beach, FL 33408 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sr. V / D
Van Beuren, Peter
17036 Traverse Circle
Jupiter, FL 33477 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
McCarthy, Eileen
506 SW 2nd Street
Boca Raton, FL 33432 ☐ Change ☒ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Jacobsen

01/11/01 561-775-5880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)