2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



Secretary of State 05-02-2003 90728 006 ***150.00

May 02, 2003 8:00 am § **FILED**

OCUMENT # 539158 Entity Name	
QUAIL RIDGE COUNTRY CLUB REALTY, INC.	
	OD WE

Principal Place of Business Mailing Address 3715 GOLF RD. 3715 GOLF RD. BOYNTON BCH, FL 33436-5498 BOYNTON BCH. FL 33436-5498 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 65-0263881 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TENNYSON, ROD Street Address (P.O. Box Number is Not Acceptable) -1801 AUSTRALIAN AVENUE, SOUTH 1450 Center Park Blvd. Suite 100 -SUITE-101 West Palm Beach 33401 WEST PALM BEACH FL-33436-City 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. I am familiar with, and accept the obligations of registered agent. 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. VPS Change XXX Addition TITLE ☐ Delete TITLE BRUGLER, JOHN NAME NAME Jayne Stroshein-Rousseau 3715 GOLF ROAD STREET ADDRESS STREET ADDRESS 3715 Golf Road **BOYNTON BEACH FL** CITY-ST-ZIP CITY-ST-ZIP Boynton Beach, FL 33436 **▼**Delete ☐ Change ☐ Addition TITLE MANCHESTER, JAN NAME **3715 GOLF RD** STREET ADDRESS STREET ADDRESS **BOYNTON BCH FL 33436** CITY-ST-7IP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ... CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an atta

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

John P. Brugler, President 561-737-5100, Ext. 302

☐ Change

☐ Addition