

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2000 8:00 am**  
**Secretary of State**

04-24-2000 90157 049 \*\*\*150.00

**DOCUMENT # V52748**

1. Entity Name

**NEWCEN GOLF COURSE, INC.**

Principal Place of Business

Mailing Address

**100 CENTURY BLVD  
 WEST PALM BEACH FL 33417  
 US**

**100 CENTURY BLVD  
 WEST PALM BEACH FL 33417-2262  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0346293**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MEROLA, MARY JANE  
 100 CENTURY BLVD  
 WEST PALM BEACH FL 33417**

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, 2000 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>D</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LEVY, H. IRWIN</b>	NAME	
STREET ADDRESS	<b>100 CENTURY BLVD.</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>W. PALM BEACH FL</b>	CITY-ST-ZIP	
TITLE	<b>DP</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LEVY, MARK F</b>	NAME	
STREET ADDRESS	<b>100 CENTURY BLVD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33417</b>	CITY-ST-ZIP	
TITLE	<b>V</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GLEESON, ANTOINETTE</b>	NAME	
STREET ADDRESS	<b>100 CENTURY BLVD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33417</b>	CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FLOYD, ORILLA</b>	NAME	
STREET ADDRESS	<b>100 CENTURY BLVD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33417</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<b>DVT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	<b>Jaiven, Jack</b>
STREET ADDRESS		STREET ADDRESS	<b>100 Century Blvd.</b>
CITY-ST-ZIP		CITY-ST-ZIP	<b>West Palm Beach, FL 33417</b>
TITLE	<input type="checkbox"/> Delete	TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	<b>Halperin, Maurice</b>
STREET ADDRESS		STREET ADDRESS	<b>100 Century Blvd.</b>
CITY-ST-ZIP		CITY-ST-ZIP	<b>West Palm Beach, FL 33417</b>

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:

*Jack Jaiven*

**Jack Jaiven, Vice President**

**4/13/00 (561) 640-3105**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

NEWCEN GOLF COURSE, INC.  
2000 UNIFORM BUSINESS REPORT  
DOCUMENT # V52748

Additions to UBR:

D  
Halperin, Barry  
100 Century Blvd.  
West Palm Beach, FL 33417

Attachment  
#V52748  
A0045205