

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90023 010 ***150.00

0107519 AT

DOCUMENT # P00000074435

1. Entity Name

WORLDCLASS POLO/EQUESTRIAN ADVISORS, INC.

Principal Place of Business

**500 WEST HIGHWAY 316
 CITRA FL 32113**

Mailing Address

**500 WEST HIGHWAY 316
 CITRA FL 32113**

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

59-3663952

Applied For

Not Applicable

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

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

Name

CLINT NANGLE

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

500 WEST HWY. 316

City

CITRA

FL

32113

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

7/19/01

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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
**PSD
 GRACIDA, GUILLERMO M JR
 500 WEST HIGHWAY 316
 CITRA FL 32113** ☐ Delete

TITLE
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☐ Change ☐ Addition

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☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/01

Date

352-595-4456

Daytime Phone #

CR2E034 (5/01)

attachment
P00000074435
773341

CLINT NANGLE
500 West Hwy 316
Citra, Florida 32133
(352) 595-4456 • Fax (352) 595-4434

July 19, 2001

Florida Department of State
Division of Corporations

~~Sirs:~~

Just returned from a trip to receive the enclosed 2 Uniform Business Reports. I talked with your office and they advised me to write to you.

I did not receive the first forms. One problem we have had is that there is a 500 East Highway 316 and mail can be delivered to the wrong location, which has happened in the past.

You will note with Gulfstream Equity Management, Inc., a long record of paying on time. WorldClass is a new corporation.

Therefore, as recommended by your staff, I am forwarding \$150.00 for each corporation. With appreciation.

Sincerely,



Clint Nangle