

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90005 028 ***158.75

DOCUMENT # 328453

1. Entity Name

Key Colony Beach Golf Club, Inc.

Principal Place of Business

100 Ave. I
 MARATHON, FL.
 33050

Mailing Address

130 Coco Plum DR
 #203
 MARATHON, FL.
 33050

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

59-1259736

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

SMITH, RAIPH F.
 130 COCO PLUM DR
 #203
 MARATHON, FL. 33050

Name

S. MARIE SMITH

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

100 AVE. I

COCO PLUM DR.

City

MARATHON

FL

Zip Code

33050

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

S. Marie Smith PD.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-20-01

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 PD
 NAME SMITH, RAIPH F.
 STREET ADDRESS 716 Key Colony Bch.
 CITY-ST-ZIP Key Colony Bch. FL. ☒ Delete

TITLE PD
 NAME SMITH, S. MARIE
 STREET ADDRESS 100 AVE. I, COCO PLUM DR.
 CITY-ST-ZIP MARATHON, FL. ☐ Change ☐ Addition

TITLE D.
 NAME CHAVERS SANDRA
 STREET ADDRESS 2920 YELLOWTAIL DR.
 CITY-ST-ZIP MARATHON, FL. ☐ Delete

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

TITLE S.D.
 NAME SMITH, S. MARIE
 STREET ADDRESS 130 COCO PLUM DR.
 CITY-ST-ZIP MARATHON, FL. ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ 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:

S. Marie Smith PD.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-01

Date

910-327-5661

Daytime Phone #

CR2E034 (11/00)