## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # 564516 May 03, 2000 8:00 am Secretary of State COUNTRY CLUB OF MIAMI REALTY, INC. 05-03-2000 90116 016 \*\*\*150.00 Principal Place of Business Mailing Address 9700 SO. DIXIE HWY., #570 9700 SO. DIXIE HWY., #570 MIAMI FL 33156 MIAMI FL 33156-2825 950408 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1806448 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7.-Name and Address of New Registered Agent-.6. Name and Address of Current Registered Agent-COLONNA, DAVID W Street Address (P.O. Box Number is Not Acceptable) 9700 S DIXIE HWY #570 MIAMI FL 33156 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE Delete TITLE BAILEY, GUY B STREET ADDRESS STREET ADDRESS 9700 SO. DIXIE HWY., #570 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BABCOCK, MARY A STREET ADDRESS STREET ADDRESS 9700 SO. DIXIE HWY., #570 CITY-ST-ZIP CITY-ST-ZIP MIAMI. FL.33156. ☐ Change ☐ Addition ☐ Delete TITLE COLONNA, DAVID W NAME NAME STREET ADDRESS 9700 SO. DIXIE HWY., #570 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 Change Addition ☐ Celete TITLE BAILEY, JOHN R NAME NAME STREET ADDRESS STREET ADDRESS 9700 SO. DIXIE HWY., #570 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** ☐ Change Addition ☐ Delete TITLE TITLE DS BAILEY, PATRICIA E. NAME NAME STREET ADDRESS STREET ADDRESS 9700 SO. DIXIE HWY., #570 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** □ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

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.

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