

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702188

1. Entity Name

EAU GALLIE YACHT CLUB

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90125 039 *****61.25

0014323

Principal Place of Business

100 DATURA DRIVE
INDIAN HARBOUR BEACH FL 32937

Mailing Address

100 DATURA DRIVE
INDIAN HARBOUR BEACH FL 32937

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 **59-0932703**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAN VEEN, HUGH
100 DATURA DRIVE
INDIAN HARBOUR BCH FL 32937

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☐ Delete
NAME **CEROW, RICHARD**
STREET ADDRESS **100 DATURA DR**
CITY-ST-ZIP **INDIAN HARBOUR BEACH FL 32937**

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

TITLE **CD** ☐ Delete
NAME **HOLLINGSWORTH, A TIMOTHY**
STREET ADDRESS **100 DATURA DRIVE**
CITY-ST-ZIP **INDIAN HARBOUR BEACH FL 32937**

TITLE **VCD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CD** ☒ Delete
NAME **CLEMENTE, CHUCK**
STREET ADDRESS **100 DATURA DRIVE**
CITY-ST-ZIP **INDIAN HARBOUR BEACH FL 32937**

TITLE **RCD** ☐ Change ☒ Addition
NAME **Donahue, Brian**
STREET ADDRESS **100 Datura Drive**
CITY-ST-ZIP **Indian Harbour Beach, FL 32937**

TITLE **VCD** ☐ Delete
NAME **HESS, BRUCE**
STREET ADDRESS **100 DATURA DRIVE**
CITY-ST-ZIP **INDIAN HARBOUR DRIVE FL 32937**

TITLE **CD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Delete
NAME **BUTLER, JOHN**
STREET ADDRESS **100 DATURA DRIVE**
CITY-ST-ZIP **INDIAN HARBOUR BEACH FL 32937**

TITLE **SD** ☐ Change ☒ Addition
NAME **Price, Carroll**
STREET ADDRESS **100 Datura Drive**
CITY-ST-ZIP **Indian Harbour Beach, FL 32937**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

REQUIRED

3-28-01

321-773-2600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)