

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702504

1. Entity Name

COUNTRY CLUB TERRACE INC

Principal Place of Business

4836 N.E. 23RD AVENUE
FT LAUDERDALE FL 33308-4737

Mailing Address

4836 N.E. 23RD AVENUE
FT LAUDERDALE FL 33308-4737

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 59-0978999

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

SWEET, ANDY
4836 N.E. 23 AVE.
FT LAUDERDALE FL 33308

Name: Michael A. Cmaylo
Street Address (P.O. Box Number is Not Acceptable): 4836 N.E. 23rd Ave #8
City: Ft. Lauderdale FL Zip Code: 33308

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

TITLE	VD	☐ Delete
NAME	MICHAEL A. CMAYLO	
STREET ADDRESS	4836 NE 23 AVE., #8	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	PD	☒ Delete
NAME	SWEET, ANDY	
STREET ADDRESS	4836 NE 23RD AVE #11	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	
TITLE	TV	☐ Delete
NAME	GATELEY, TINA	
STREET ADDRESS	4836 NE 23RD AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	
TITLE	2V	☒ Delete
NAME	ROWLAND, JAMES	
STREET ADDRESS	4836 NE 23RD AVE #31	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	
TITLE	SD	☐ Delete
NAME	RUDMANN, EUGENIA	
STREET ADDRESS	4836 NE 23RD AVE #1	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	
TITLE	AS	☐ Delete
NAME	BENSON, ROSALIE	
STREET ADDRESS	4836 NE 23RD AVE #32	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ASST. Secretary	☒ Change ☐ Addition
NAME	Michael Corbett	
STREET ADDRESS	4836 N.E. 23rd Ave #10	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Terrence Dineen ASST. Trusty	☐ Change ☐ Addition
NAME		
STREET ADDRESS	4836 N.E. 23rd Ave #8	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Michael A Cmaylo President

Date

4/30/02 Daytime Phone #

FILED

Jun 19, 2002 8:00 am
Secretary of State

05-27-2002 90306 029 ****61.25

93765



DO NOT WRITE IN THIS SPACE

CR2037 (9/01)