

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90014 018 ****61.25

DOCUMENT # 716194

1. Entity Name

BROOKSVILLE GOLF & COUNTRY CLUB, INC.

Principal Place of Business

Mailing Address

**23446 LINKS DRIVE
 BROOKSVILLE FL 34601**

**23446 LINKS DRIVE
 BROOKSVILLE FL 34601**

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

59-1260192

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

**MERRITT, JR DANIEL B
 224 N BROAD ST
 BROOKSVILLE FL 34601**

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 **ST** ☐ Delete
 NAME **CAVERLY, JOHN**
 STREET ADDRESS **7166 LEXINGTON CIRCLE**
 CITY-ST-ZIP **BROOKSVILLE FL 34602**

TITLE **P** ☐ Change ☒ Addition
 NAME **Padgett, Richard**
 STREET ADDRESS **7145 Mariner Blvd.**
 CITY-ST-ZIP **Spring Hill, FL 34609**

TITLE **V** ☒ Delete
 NAME **STENDER, ROBERT**
 STREET ADDRESS **6044 BEECHWOOD DR**
 CITY-ST-ZIP **RIDGE MANOR FL 33523**

TITLE **V** ☒ Change ☐ Addition
 NAME **Tarone, Herb**
 STREET ADDRESS **10184 Warden Drive**
 CITY-ST-ZIP **Brooksville, FL 34601**

TITLE **P** ☒ Delete
 NAME **PADULA, CAMILLE**
 STREET ADDRESS **3498 CRUM RD**
 CITY-ST-ZIP **BROOKSVILLE FL 34609**

TITLE **D** ☒ Change ☐ Addition
 NAME **Raymond, Chuck**
 STREET ADDRESS **9922 Domingo Drive**
 CITY-ST-ZIP **Brooksville, FL 34601**

TITLE **D** ☐ Delete
 NAME **TARONE, HERB**
 STREET ADDRESS **77 GILLIAN DRIVE**
 CITY-ST-ZIP **BROOKSVILLE FL 34609**

TITLE **D** ☐ Change ☒ Addition
 NAME **Law III, Neil**
 STREET ADDRESS **295 Sunset Dr.**
 CITY-ST-ZIP **Brooksville, FL 34601**

TITLE **D** ☐ Delete
 NAME **RAYMOND, CHUCK**
 STREET ADDRESS **4548 SECRETARIAT RUN**
 CITY-ST-ZIP **BROOKSVILLE FL 34609**

TITLE **D** ☐ Change ☒ Addition
 NAME **Hannon, John**
 STREET ADDRESS **35006 Whispering Oaks Blvd.**
 CITY-ST-ZIP **Ridge Manor, FL 33523**

TITLE **D** ☒ Delete
 NAME **PETTY, JOHN**
 STREET ADDRESS **11031 NOTTINGHAM FORREST DR**
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

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:

John L. Caverly
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)