

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 717827**

1. Entity Name

MARTIN COUNTY ANGLERS CLUB, INC.

Principal Place of Business

PO BOX 2968
STUART FL 34995

Mailing Address

PO BOX 2968
STUART FL 34995

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

59-2354203

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

GOLDEN, ROSLYN
3923 SE JEFFERSON ST
STUART FL 34997

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.

X 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 FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DSC
NAME MILLS, HAP
STREET ADDRESS 4173 NE SKYLINE DRIVE
CITY-ST-ZIP JENSEN BEACH FL 34957 ☐ DeleteTITLE T
NAME GOLDEN, ROSLYN
STREET ADDRESS 3923 SE JEFFERSON, ST
CITY-ST-ZIP STUART, FL 34997 ☐ Change ☒ AdditionTITLE D
NAME SIGLER, RICH
STREET ADDRESS 1309 DYER PT ROAD
CITY-ST-ZIP PALM CITY FL 34990 ☐ DeleteTITLE D
NAME PETE KAKOYANNIS
STREET ADDRESS 80 S. RIVER ROAD
CITY-ST-ZIP STUART, FL 34996 ☐ Change ☒ AdditionTITLE D
NAME WERNER, SY
STREET ADDRESS 2949 SANTA ANITA
CITY-ST-ZIP PORT SAINT LUCIE FL 34952 ☐ DeleteTITLE D
NAME VINCE MCMANUS
STREET ADDRESS 128 EVERGLADES VLVD
CITY-ST-ZIP STUART, FL 34994 ☐ Change ☒ AdditionTITLE D
NAME PARDES, MARTY
STREET ADDRESS 340 NETLES BLVD
CITY-ST-ZIP JENSEN BEACH FL 34952 ☒ DeleteTITLE D
NAME ED SKUPEEN
STREET ADDRESS 1552 SW SPRINGFIELD COURT
CITY-ST-ZIP PALM CITY, FL 34990 ☒ Change ☐ AdditionTITLE D
NAME TAFOYA, PHIL & GERRY
STREET ADDRESS 200 OLIVE AVENUE
CITY-ST-ZIP PORT SAINT LUCIE FL 34952 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE P
NAME BURKE, JOHN J
STREET ADDRESS 4174 SE OAKLAND STREET
CITY-ST-ZIP STUART FL 34997 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

Date

Daytime Phone #

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90027 047 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (9/01)