FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 724943

1. Corporation Name

MAC ARTHUR BEACH & RACQUET CLUB INC

Prin	cipal	Plac	e of	Bu	sines	s

700 GOLDEN BEACH BLVD.

U-140 VENICE FL 34285

VENICE FL 34285

Mailing Address

700 GOLDEN BEACH BLVD. U-140

VENICE FL 34285



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2. P	rincipal Place of Business	2a. Mailing Ad	ddress		· <u>-</u>	Date Incorporated or Qualifed 12/04/1972			
	Suite, Apt. #, etc.	Suite, Apt	. #, etc.			4. FEI Number 59-1536335	Applied For Not Applicable		
	City & State	City & Sta	ite			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
	ip Country	Zip 29	ip Country			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
				81	Name				
HESS, JAMES E 700 GOLDEN BEACH BLVD			82 Street Address (P.O. Box Number is Not Acceptable)						
	140			83					

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

84 City

SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able. (NOTE: Re	gistered Agent signature re-			DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHAI	NGES TO OFF			
TITLE	DP	☐ DELETE	1.1 TITLE				Change	Addition
NAME	RITTENHOUSE, MARGE		1.2 NAME					
STREET ADDRESS	700 GOLDEN BEACH BLVD U 126		1.3 STREET ADDRESS					
CITY-ST-ZIP	VENICE FL 34285		1.4 CITY-ST-ZIP					
TITLE	DVP	☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME	MCCULLOUGH, BEN		2.2 NAME					1
STREET ADDRESS	700 GOLDEN BEACH BLVD U 439		2.3 STREET ADDRESS					
CITY-ST-ZIP	VENICE FL 34285		2. 4 CITY-ST-ZIP					32
TITLE	DT	X DELETE	3.1 TITLE	DT			Change	Addition
NAME	RIDDELL, NATALIE		3.2 NAME	SCANTLING,	DONALD)		
STREET ADDRESS	700 GOLDEN BEACH BLVD U209		3.3 STREET ADDRESS	700 GOLDEN	BEACH	BLVD.	U 21	8.
CITY-ST-ZIP	VENICE FL 34285		3.4. CITY+ST-ZIP	VENICE, FLO	DRIDA	34285		
TITLE	DS	☐ DELET £	4.1 TITLE				Change	Addition
NAME	ZINGERMAN, GAYLE		4, 2 NAME					
STREET ADDRESS	700 GOLDEN BEACH BLVD U 126		4.3 STREET ADDRESS			•		
CITY-ST-ZIP	VENICE FL 34285		4.4 CITY-ST-ZIP				_	
TITLE	D	□ DELETE	5.1 TITLE				☐ Change	Addition
NAME	NCGOWAN, JOE		5.2 NAME					
STREET ADDRESS	700 GOLDEN BEACH BLVD U-127		5.3 STREET ADDRESS					1
CITY-ST-ZIP	VENICE FL 34285		5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CITY-ST-ZIP					<u> </u>

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Zip Code

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