

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 01, 2008 8:00 am**  
**Secretary of State**

05-01-2008 90196 007 \*\*\*\*61.25

**60036331**

DO NOT WRITE IN THIS SPACE

DOCUMENT # **725281**

1. Entity Name

**LITTLE CLUB HOMEOWNERS ASSOCIATION, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**FLORIDA**

3. Mailing Address

**9601 SE LITTLE CLUB WAY S.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**TEQUESTA, FL**

City & State

**TEQUESTA, FL**

4. FEI Number

**59-2331061**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **PAUL STRAUB - TREASURER**

Street Address (P.O. Box Number is Not Acceptable)

**9842 SE LITTLE CLUB WAY S**

City **TEQUESTA**

**FL**

Zip Code  
**33469**

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

**PAUL STRAUB - TREASURER**

*Paul Straub*

**07/28/08**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**

**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Department of State**

**12 OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT DOLORES MITROTZ 18366 SE BIRDIE LANE TEQUESTA, FL 33469</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VICE PRESIDENT LESLEY SWALIK 18320 SE CLUB LANE TEQUESTA, FL 33469</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DIRECTOR LINDA MATES 9840 SE LITTLE CLUB WAY N TEQUESTA, FL 33469</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SECRETARY GEORGE GALLAGHER 18313 SE EAGLE LAKE TEQUESTA, FL 33469</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TREASURER PAUL STRAUB 9842 SE LITTLE CLUB WAY S TEQUESTA, FL 33469</b>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Paul Straub* (**PAUL STRAUB**)

**07/28/08**

**561-427-5627**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/01)