

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726438

1. Entity Name

THE YACHT & RACQUET CLUB OF BOCA RATON, INC.

Principal Place of Business

2711 NO OCEAN BLVD  
BOCA RATON FL 33431-7115

Mailing Address

2711 NO OCEAN BLVD  
BOCA RATON FL 33431-7115

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

59-1651350

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WOOD, RICHARD W  
2711 N OCEAN BLVD  
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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

*Richard W. Wood*

3-1-01

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

Mako Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE SD  
NAME NOREN, PETER  
STREET ADDRESS 2701 N. OCEAN BLVD.  
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE V  
NAME JACOBSON, PAUL  
STREET ADDRESS 2667 N. OCEAN BLVD.  
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE TD  
NAME HAAS, WILLIAM  
STREET ADDRESS 2797 NORTH OCEAN BLVD  
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE PD  
NAME STURGELL, CHARLES  
STREET ADDRESS 2701 N OCEAN BLVD.  
CITY-ST-ZIP BOCA RATON FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD  
NAME MICHAEL WESTLY  
STREET ADDRESS 2677 N OCEAN BLVD  
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Change ☐ Addition

TITLE V  
NAME PAT ALIBRANDI  
STREET ADDRESS 2727 N OCEAN BLVD  
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD  
NAME BARRY LEVEY  
STREET ADDRESS 2657 N OCEAN BLVD  
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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:

*Barry Levey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2-01

561-368-803

Date

Daytime Phone #

CR2E037 (10/00)

0004282

FILED  
Mar 06, 2001 8:00 am  
Secretary of State

03-06-2001 90341 029 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE