

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90140 048 ***150.00

DOCUMENT # 728154

1. Entity Name

Colony Beach & Tennis Club Association, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1620 Gulf of Mexico Drive

Suite, Apt. #, etc.

3. Mailing Address
% Stephen J. Mitchell

Suite, Apt. #, etc.
201 N. Franklin Street, Suite 2100

DO NOT WRITE IN THIS SPACE

City & State Longboat Key, FL

City & State Tampa, FL

4. FEI Number 591519496

Applied For

Not Applicable

Zip 34228

Country USA

Zip 33602

Country USA

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 Dr. Murray J. Klauber

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

1620 Gulf of Mexico Drive

City Longboat Key

FL

Zip Code 34228

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1. Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/Vice President
Colson Hillier
1923 Sea Oats Avenue
Fernandina Beach, FL 32034

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/President
John LaMont
1527 Prairie
Aurora, IL 60506

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/Treasurer
David Bank
4801 Reservoir Road
Geneseo, NY 14454

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director
Sal Zizza
1 Grace Square, 10th Floor
New York, NY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/Secretary
Lana Dorfman
1490 St. Clare
Montreal Quebec Canada

TITLE
NAME
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SALVATORE ZIZZA Director

Date

Daytime Phone #

CR2E034B (12/01)