## ,2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # 731773** Feb 09, 2000 8:00 am 1. Entity Name Secretary of State JEWISH CLUB OF KINGS POINT WEST INC. 02-09-2000 90003 035 \*\*\*\*61.25 Principal Place of Business Mailing Address C/O RICHARD AXINN C/O RICHARD AXINN **813 LAJOLLA AVE** 813 LAJOLLA AVE SUN CITY CENTER FL 33573 SUN CITY CENTER FL 33573 2. Principal Place of Business 3. Mailing Address c/o Arthur Blumenthal c/o Arthur Blumenthal Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE <u>906 McDaniel St</u> <u>906 McDaniel St</u> Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable un City Center F Sun\_City\_Cente \$8.75 Additional Country 5. Certificate of Status Desired \_\_\_\_\_\_ 33573 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Arthur Blumenthal Arthur Blumanthsi Street Address (P.O. Box Number is Not Acceptable) **AXINN, RICHARD** 906 McDaniel St 813 LA JOLLA AVE SUN CITY CENTER FL 33573 Sun City Center 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. .Arthur Blumenthal Jan.19. 2000 SIGNATURE Stonature) typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Y Change XX Delete TITLE President TITLE **AXINN, RICHARD** NAME NAME Arthur Blumenthal STREET ADDRESS STREET ADDRESS 813 LA JOLLA AVE 906 McDaniel St Sun City Center F1 33573 CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 ☐ Addition ☐ Delete TITLE Vice President T Change TITI F NAME SHUSTERMAN, FREDA NAME Nathan Sharf STREET ADDRESS STREET ADDRESS 2020 DEL WEBB EAST 2006 El-Rancho Dr 🗥 🚟 CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 Sun City Center, Fl 33573 TITLE (X) Change ☐ Addition Delete TITLE Secretary . Ename ALTER, BEVERLY Lee Dain STREET ADDRESS STREET ADDRESS 1004 OTTER MILL WAY 2222 Nantucket Dr CITY-ST-ZIP CITY-ST-ZIP Sun City Center, Fl 33573 SUN CITY CENTER FL 33573 ☐ Addition Delete TITLE Treasurer SHARF, ENID NAME Julia Lohn-STREET ADORESS STREET ADDRESS 2006 EL RANCHO DR 2430 Nantucket Harbor Loop Sun City Center, FI 33573 CITY-ST-ZIP CITY-ST-7/P SUN CITY CENTER FL 33573 Change ☐ Addition ☐ Delete TITLE TITLE **DinectSr**eaman NAME NAME ROSE, DAVID Jonas Freeman STREET ADDRESS STREET ADDRESS 22210 DEL WEBB WEST 2232 Grenadier Dr CITY-ST-7IP CITY-ST-7IP SUN CITY CENTER FL 33573 un-City Center, F1-33573 K Change ☐ Addition TITLE ☐ Delete TITLE Director NAME WESCHLER, GERTRUDE NAME Rose Dayid 2210 Del Webb Blvd West STREET ADDRESS STREET ADDRESS **503 B FLINTSHIRE CT**

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.

CITY-ST-ZIP

SIGNATURE:

SUN CITY CENTER FL 33573

CITY-ST-ZIP

Arthur Blumenthal ROSTED

SIGNATURE RESIDENCE OF DIRECTOR

A19,2000 (813)634-4884

Daytime Phone #