

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736697

1. Entity Name

THE CHATEAUX CLUB, INC.

FILED

May 23, 2002 8:00 am
Secretary of State

05-23-2002 90104 028 ****61.25

Principal Place of Business

7071 W. COMMERCIAL BLVD
STE 28
TAMARAC FL 33319

Mailing Address

7071 W. COMMERCIAL BLVD
STE 28
TAMARAC FL 33319

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 59-2201969

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUNRAE MANAGEMENT SERVICES, INC.
7071 W. COMMERCIAL BLVD.
SUITE 28
TAMARAC FL 33319

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

Karen Busch, VP/LCAM

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Delete
NAME	ROBINSON, PAUL	
STREET ADDRESS	20245 W OAK HAVEN CIR	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	D	☒ Delete
NAME	SOROSKY, GENE	
STREET ADDRESS	1953 S. OAK HAVEN CIRCLE	
CITY-ST-ZIP	N MIAMI FL 33179	
TITLE	S	☒ Delete
NAME	HENDELSON, FRED	
STREET ADDRESS	20265 WEST OAK HAVEN CIRCLE	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	DT	☒ Delete
NAME	LABATON, SANDY	
STREET ADDRESS	20001 W OAK HAVEN CIR	
CITY-ST-ZIP	N MIAMI FL 33179	
TITLE	VP	☒ Delete
NAME	BESSER, PAUL	
STREET ADDRESS	1917 S. OAK HAVEN CIRCLE	
CITY-ST-ZIP	N. MIAMI BEACH FL 33179	
TITLE	DS	☒ Delete
NAME	MARGOLIS, RICHARD	
STREET ADDRESS	20031 WEST OAK HAVEN CIRCLE	
CITY-ST-ZIP	MIAMI FL 33179	

TITLE	P	☐ Change ☒ Addition
NAME	Simpson, Stan	
STREET ADDRESS	1932 N. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	
TITLE	VP.	☐ Change ☒ Addition
NAME	Weinstein, Steven	
STREET ADDRESS	1930 N. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	
TITLE	TS	☐ Change ☒ Addition
NAME	Bergqvist, Denise	
STREET ADDRESS	1947 N. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	
TITLE	D	☐ Change ☒ Addition
NAME	Politano, Jonathan	
STREET ADDRESS	202 S W. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	
TITLE	D	☐ Change ☒ Addition
NAME	Werner, Ken	
STREET ADDRESS	1961 S. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	
TITLE	D	☐ Change ☒ Addition
NAME	Kahn, Howard	
STREET ADDRESS	20209 W. Oak Haven Circle	
CITY-ST-ZIP	N. Miami Beach, FL 33179	

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:

Stanley Simpson, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)