

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90194 031 \*\*\*\*61.25

**DOCUMENT # 741663**

1. Entity Name  
**CORAL RIDGE YACHT CLUB, INC.**

Principal Place of Business  
**2800 YACHT CLUB BLVD  
 FT LAUDERDALE FL 33304-4542**

Mailing Address  
**2800 YACHT CLUB BLVD  
 FT LAUDERDALE FL 33304-4542**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0603864**

Applied For  
 Not Applicable

Zip Country

Zip Country

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

## 6. Name and Address of Current Registered Agent

**BENTON, WILLIAM  
 2888 N.E. 25 COURT  
 FORT LAUDERDALE FL 33305**

## 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 \_\_\_\_\_  
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

**Make Check Payable to  
 Department of State**

## 10. OFFICERS AND DIRECTORS

|                                                |                                                                                                            |                                            |
|------------------------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br><b>TOMLINSON, JOHN</b><br><b>4900 N. OCEAN BLVD. #819</b><br><b>FORT LAUDERDALE FL 33308</b>   | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>NATALE, JOSEPH</b><br><b>2820 N.E. 55 PLACE</b><br><b>FORT LAUDERDALE FL 33308</b>          | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>JOHNSON, EDWARD M</b><br><b>1801 W. TERRA MAR DR.</b><br><b>POMPANO BEACH FL 33062</b>      | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br><b>BENTON, WILLIAM</b><br><b>2888 N.E. 25 COURT</b><br><b>FORT LAUDERDALE FL 33305</b>         | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T</b><br><b>LOUGHNANE, WILLIAM</b><br><b>2812 N.E. 37 STREET</b><br><b>FORT LAUDERDALE FL 33308</b>     | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>WALDMAN, WILLIAM</b><br><b>936 INTRACOASTAL DR., PH4</b><br><b>FORT LAUDERDALE FL 33304</b> | <input checked="" type="checkbox"/> Delete |

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                                                |                                                                                                     |                                                                                         |
|------------------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>Robert Rayls</b><br><b>2800 Yacht Club Blvd.</b><br><b>Ft. Lauderdale, FL 33304</b>  | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>President</b>                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T</b><br><b>Kenneth Brown</b><br><b>6611 N.E. 20th Terrace</b><br><b>Ft. Lauderdale FL 33308</b> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>Leonard Tower</b><br><b>3332 N.E. 42nd Court</b><br><b>Ft. Lauderdale FL 33308</b>   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: *William M. Benton*

**REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Secretary*

*4-16-02 954-566-7806*

CR2E037 (9/01)