

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 08, 2000 8:00 an
Secretary of State

02-08-2000 90054 033 ****61.25

DOCUMENT # 745490

1. Entity Name

SUN COAST YACHT CLUB, INC.

Principal Place of Business

Mailing Address

1661 RINGLING BLVD.
P O BOX 82
SARASOTA FL 34230

1661 RINGLING BLVD.
P O BOX 82
SARASOTA FL 34230-0082

C0017968

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2669866

Applied F

Not App

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASEY, JOHN
4104 128TH ST
APT. 704
CORTEZ FL 34215

Name BERNARD L. WHITE

Street Address (P.O. Box Number is Not Acceptable)
4115 129th ST, WEST

City CORTEZ

FL

Zip Code 34215

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

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

BERNARD L. WHITE

(NOTE: Registered Agent signature required when reinstating)

1/19/00
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 NAME STREET ADDRESS CITY-ST-ZIP	PD DRAKE, CHRISTOPHER 5821 RIEGEL'S HARBOR RD SARASOTA FL 34236	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HUTCHINS, JANE 1275 DOCKSIDE PL SARASOTA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FISHER, JOYCE 400 BRYN MAWR ISLAND BRADENTON FL 34207	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO WHITE, BERNIE 4115 129TH ST W CORTEZ FL 34215	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	COMMODORE BERNARD L. WHITE 4115 129th ST, WEST CORTEZ, FL 34215	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-COMMODORE FORREST CRAWFORD 8770 MIDNIGHT PASS RD. APT. 204B SARASOTA, FL 34242	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REAR COMMODORE - RACE LEN DIETCH 450 GOLF OF MEXICO DRIVE APT 2301 LONGBOAT KEY, FL 34118	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REAR COMMODORE-CRUISE NEWELL MASSENGALE 812 51st AVE., WEST BRADENTON FL 34207	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JACK MILLER 19 WHISPERING SANDS DR. APT. 1101 SARASOTA FL 34242	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY DORIS H. WHITE 4115 129th ST, W. CORTEZ, FL 34215	<input checked="" type="checkbox"/> Change <input type="checkbox"/>

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 11, as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bernard L. White
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/00

941-795-0378