

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90106 042 ****61.25

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DOCUMENT # 746139

1. Entity Name

BEACON WOODS GOLF CLUB, INC.



Principal Place of Business

**13140 CLOCK TOWER PKWY
BAYONET PT FL 34667**

Mailing Address

**13140 CLOCK TOWER PKWY
BAYONET PT FL 34667**

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 **59-1892679**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YOUNG, DARLENE
13140 CLOCK TOWER PARKWAY
BAYONET POINT FL 34667**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☒ Delete
NAME **EDEN, EUGENE**
STREET ADDRESS **7701 SUNDOWN COURT**
CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **President** ☐ Change ☒ Addition
NAME **Phillip McKinnon**
STREET ADDRESS **13529 Glaze Brook Dr.**
CITY-ST-ZIP **Bayonet Point, FL 34667**

TITLE **PD** ☒ Delete
NAME **CILLO, PAT**
STREET ADDRESS **8026 GREENSIDE LANE**
CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **V. President** ☐ Change ☒ Addition
NAME **Chuck DelCarpine**
STREET ADDRESS **12806 Charter Oak Way**
CITY-ST-ZIP **Bayonet Point, FL 34667**

TITLE **SD** ☒ Delete
NAME **DEL CARPINE, CHUCK**
STREET ADDRESS **12806 CHARTER OAK WAY**
CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Vivian Finch**
STREET ADDRESS **8503 MILL CREEK LANE**
CITY-ST-ZIP **Bayonet Point, FL 34667**

TITLE **TD** ☒ Delete
NAME **MCKINNON, PHILLIP**
STREET ADDRESS **13529 GLAZE BROOK DRIVE**
CITY-ST-ZIP **BAYONET POINT FL 34667**

TITLE **Treasurer** ☐ Change ☒ Addition
NAME **Frank Heylek**
STREET ADDRESS **11348 Turtle Dove Place**
CITY-ST-ZIP **New Port Richey, FL 34654**

TITLE **GD** ☒ Delete
NAME **MILLER, LAMAR**
STREET ADDRESS **5541 GRIDLEY LANE**
CITY-ST-ZIP **NEW PORT RICHEY FL 34655**

TITLE **Director/Governor** ☐ Change ☒ Addition
NAME **Lewis Compton**
STREET ADDRESS **8030 Laurel Vista Loop**
CITY-ST-ZIP **Port Richey, FL 34668**

TITLE **GD** ☒ Delete
NAME **PANZULLO, JOE**
STREET ADDRESS **6923 BRAMBLEWOOD DR**
CITY-ST-ZIP **PORT RICHEY FL 34668**

TITLE **Director/Governor** ☐ Change ☒ Addition
NAME **Joseph Panzullo**
STREET ADDRESS **6923 Bramblewood Dr**
CITY-ST-ZIP **Port Richey, FL 34668**

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: *Joe Panzullo* **REQUIRED**

4/1/03 727 868-7673

CR2E037 (10/02)