2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 757782 1. Entity Name SUNRISE LAKES MEN'S CLUB PHASE III., INC. Principal Place of Business Mailing Address C/O JERRY GROVE C/O JERRY GROVE 9750 SUNRISE LAKES BLVD 9750 SUNRISE LAKES BLVD SUNRISE FL 33322 SUNRISE FL 33322

FILED Feb 25, 2002 8:00 am Secretary of State

02-25-2002 90099 013 ****61.25



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2. Principal F	Place of Busin	ness	3. Mailing Address	ng Address							
Suite, Apt.	#, etc.	···	Suite, Apt. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN	THIS SPACE		
City & Stat	te	en en rice y .	City & State	City & State			59-2102559			pplied For	
Zip	Zip	Country			5. Certificate of Status Desired \$8.75 Additional Fee Required						
	6. Name	and Address of Current	t Registered Agent	1		7.	Name and Add	Iress of New Registe	ered Agent		
					Name						
BLDG 105	RISE LAKE: -APT 309	S BLVD		-	Street Address (P.O. Box Number is Not Acceptable) City Zip Code						
SUNRISE	FL 33322				FL Zip Code						
SIGNATURE .		A D KAHN or printed name of registered agen				TALM re required when	<u> </u>		JATE		
FILE NOW: FEE IS \$61.25 9. Election Ca Trust Fund						ب Add	\$5.00 May Be Added to Fees Make Check Payable to Department of State				
10.		OFFICERS AND DI	RECTORS	11.			ITIONS/CHANG	ES TO OFFICERS AN	ID DIRECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD SCHNEIDER, NORMON 9461 SUNRISE LAKES BLVD SUNRISE FL 33322				TITLE PD SEFINEITEN, NORMAN Change Addition AME TREET ADDRESS SUNKISE, FL. 33323						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAHN, HO 9360 SUN SUNRISE I	RISE LAKES BLVD,	Delete	TITLE NAME STREE CITY-S	TADDRESS	, *** - * * *		-	Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		DRN, MORRIS ISLAND RD FL 33322	Delete	TITLE NAME STREET CITY-S	T ADDRESS	50917 Ma 890 Sun	DION L	BOWS WI SF LAIRES .33321	M Change およいし	☐ Addition	
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indicated of the cor	on this repor poration or th	t or supplemental report is e receiver or trustee emp	n this filing does not qualify for s true and accurate and that owered to execute this repor- with all other like empowered	my signatu t as require	ire shali hav	ve the same	e legal efféct as	f made under oath; th	nat I am an officer	or director	

SIGNATURE: HOWARD PRATTIE SO THE STATE STA

2/12/0~ 742-9231
Date Date Davine Phone #