

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2001 8:00 am
Secretary of State

03-02-2001 90111 005 ****61.25

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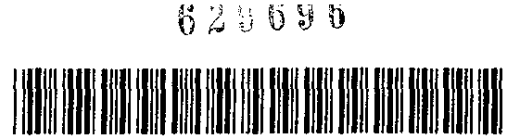
1. Entity Name

THE GOLF AND RACQUET CLUB AT EASTPOINTE, INC. ✓

Principal Place of Business 13462 CROSSPOINTE DRIVE PALM BEACH GARDENS FL 33418	Mailing Address 13462 CROSSPOINTE DRIVE PALM BEACH GARDENS FL 33418
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2099742	Applied For Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ST. JOHN KING & DICKER 500 AUSTRALIAN AVENUE SOUTH CLEARLAKE PLAZA, SUITE 600 WEST PALM BEACH FL 33401	7. Name and Address of New Registered Agent Name <u>Cari A. Podesta, P.A.</u> Street Address (P.O. Box Number is Not Acceptable) <u>11382 Prosperity Farms Road, Suite 227</u> City <u>Palm Beach Gardens</u> <u>FL</u> Zip Code <u>33410</u>
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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 Cari A. Podesta Cari A. Podesta, P.A. 2-15-01
 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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VPD GREENBURG, MORT 6866 TOUCHSTONE CIRCLE PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DD TUSH, ANN 12770 OAKNOLL DRIVE PALM BEACH GARDENS FL 33418	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Vice President Bernard Goldstein 6355 Brandon Street Palm Beach Gardens, FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD WASSERUAN, CHLOE 12910 OAK KNOLL DRIVE PALM BEACH GARDENS FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Director Wasserman, Chloe	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD SALTER, PAUL V 12890 OAK KNOLL DR PALM BEACH GARDENS FL 33418	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Director Ralph Hubregsen 12824 Touchstone Place Palm Beach Gardens FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DD ABRAMOWITZ, MURRAY 13502 TOUCHSTONE PL PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD NEWMAN, SAUL 13275 SAFFRON CIRCLE PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2. 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: Saul Newman SAUL NEWMAN 2/22/01 561 627 6662
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR25037 (10/00)