

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763891

1. Entity Name

LAKE WORTH VILLAGE COMMUNITY CLUB, INC.

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90007 017 ****61.25

Principal Place of Business

Mailing Address

5160 LAKE WORTH ROAD
LAKE WORTH FL 33463

5160 LAKE WORTH ROAD
LAKE WORTH FL 33463-3369

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2241152

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

7. Name and Address of New Registered Agent

CAINE, WALTER H
4209 CONRAD CIRCLE
LAKE WORTH FL 33463

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME JOHNSTON, KAATEN ☒ Delete
STREET ADDRESS 4466 MARKS WAY
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE EWALD, JOHN PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS 5117 GINGER WAY
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE VP
NAME HOOD, JAMES ☒ Delete
STREET ADDRESS 4348 GRETCHEN PLACE
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE VP ☒ Change ☐ Addition
NAME MENARD, MAURICE
STREET ADDRESS 4313 THEAGSA COURT
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE S
NAME MAHONEY, CAROL ☒ Delete
STREET ADDRESS 4199 CONRAD CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE S ☒ Change ☐ Addition
NAME FISH, BELVIA
STREET ADDRESS 4348 THERESA COURT
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE T
NAME CAINE, WALTER H ☐ Delete
STREET ADDRESS 4209 CONRAD CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE T ☐ Change ☐ Addition
NAME CAINE, WALTER H.
STREET ADDRESS 4209 CONRAD CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE D
NAME BURKART, GORDON ☐ Delete
STREET ADDRESS 5462 COOPER COURT
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE D ☒ Change ☐ Addition
NAME BURKART, GORDON
STREET ADDRESS 5462 COOPER COURT
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE D
NAME BOUTIN, JULIE ☒ Delete
STREET ADDRESS 4463 DOROTHEA DR.
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE D ☒ Change ☐ Addition
NAME KOZYRA, GENEVIEVE
STREET ADDRESS 4669 NANCY DRIVE
CITY-ST-ZIP LAKE WORTH FL 33463

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:

Walter H. Caine, Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00 561 965-4129
Date Daytime Phone #

CR2E037 (9/99)