## 2001 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 766987**

1. Entity Name

## CYRC MASTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% PATRICIA RICHARDSON 9854 CALOOSA YACHT & RAQUET CLUB DR. % PATRICIA RICHARDSON 12650 WHITEHALL DRIVE

## FILED Apr 13, 2001 8:00 am Secretary of State 04-13-2001 90008 035 \*\*\*\*61.25

FT. MYERS F	L 33919	FORT MYERS FL 3390/						TIEN BIEN E	SENS EXECUTES	
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & Stat	e	City & State			4. FEI Number 65-0018209				pplied For ot Applicable	7
Zip	Country	Zip Countr		у	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					
			1.7	Name						1
BENSON, MARK R				Street Address (P.O. Box Number is Not Acceptable)						
12650 WHITEHALL DRIVE FORT MYERS FL 33907										1
				City			FL	Zip Cod	ie	1
8 The above	named entity submits this statement for	r the nurnose of changing its	registered	office or registe	ered agent or bot	h in the state of Florid	la.			1
o. The above		The purpose of onlinging no	rogioisi od	omeo or region	3100 agom, or 200					
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if explicable (NOTE	. Societared Ar	pent signature require	nd when reinstating)		DATE			
	alghature, typed or printed harne or registered agents	in the Rappicable, (NOTE	Hogistored A	Jent eignatore require	oo anomorada g	· <del></del>				-
						88-1 6	Shaala Da		_	}
	FILE NOW:				00 May Be ed to Fees		Check Pa	-	,	
	FEE IS \$61.25	Trust rano contribe	ation.	□ Aude	ou to rees	— — <del>Бера</del>	rtment o	Jule		
10.	OFFICERS AND DIF	L RECTORS	11.		ADDITIONS/CH/	ANGES TO OFFICERS	AND DIRE	CTORS IN	110	1
TITLE	VD OF THE LIFE AND DATE	Delete	TITLE		PD			Change	Addition	18
NAME	SMITH, MATTHEW	Delete	NAME		Schmitt,	William T.,	Jr			(10/00)
STREET ADDRESS	9890 CALOOSA YACHT & RACQUET CLUB DRIVE		STREET #	DDRESS	9811 Ensign Ct					1.
CITY-ST-ZIP	FT. MYERS FL 33919		CITY-ST	-ZIP	Fort Myer	s, FL 33919	•			E027
TITLE	SD	Delete	TITLE	· ·	VD		[	Change	Maddition	]ĝ
NAME	BENNETT, NONA	/ = 001000	NAME		Bradley, Marguerite					1
STREET ADDRESS	9730 MAINSAIL COURT	JRT		DDRESS	9920 CY&R Club Drive					
CITY-ST-ZIP	FORT MYERS FL 33919.		CITY-ST	-ZiP	Fort Myer	s, FL 33919	)			<u>.</u> ] .
TITLE	PTD	Delete	TITLE		STD	_	{	Change	<b>⊠M</b> Addition	
NAME	MILLER, MYRON	/	NAME		Campbell,					1
STREET ADDRESS	9601 HALYARDS CT #14		STREET A		9780 Main					{
CITY-ST-ZIP	FORT MYERS FL 33919		CITY-ST	-ZIP	Fort Myer	s, FL 33919	<del>)</del>			1
TITLE	D	☐ Delete	TITLE				[	Change	Addition	
NAME	MURTHA, JOHN		NAME							
STREET ADDRESS	9601 HALYARDS CT #24		STREET #							-
CITY-ST-ZIP	FORT MYERS FL 33919		CITY-ST	ZIP	<del>D</del>					4
TITLE	D CANDEDO EDIFENE	Delete	TITLE		z Witzberge	r. James"	[	Change	Addition	
NAME ;	SANDERS, ERLEENE	ι,	. NAME			ards Ct #11				
STREET ADDRESS CITY-ST-ZIP	9806 LEEWARD CT FORT MYERS FL 33919		STREET A			s, FL 33919	)			
	FURI MIERO PE 33313	П		בנו	1.71 C 1.7 CI			7 0		-
TITLE		☐ Delete	TITLE				ļ	Change	Addition Addition	}
NAME STREET ADDRESS			NAME STREET A	DUBECC						1
CITY-ST-ZIP				- ZIP						
			J J.	-						ì

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 and all other like empowered.

**SIGNATURE:**