

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # 829764

1. Entity Name

Golf Host Resorts, Inc.

02 APR 10 AM 11:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

40292 US HWY 550 North

Suite, Apt. #, etc.

3. Mailing Address

PO Box 3131

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Durango CO

City & State

Durango CO

4. FEI Number

84-0631130

Applied For

Not Applicable

Zip

81301

Country

USA

Zip

81302

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City

Plantation

FL

Zip Code  
33324

**DO NOT WRITE  
IN THIS SPACE**

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, President & Secretary Merrick Kleeman 591 West Putnam Ave. Greenwich CT 06830
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Executive Vice President Jeffrey Rosenthal 591 West Putnam Ave. Greenwich CT 06830
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Executive Vice President Jerome Silvey 591 West Putnam Ave. Greenwich CT 06830
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President & Treasurer Keith Wilt 36750 US Hwy 19 N. Palm Harbor FL 34684
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Robert Sciamer 320 Interstate North Highway Suite 220 Atlanta GA 30339
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

TITLE NAME STREET ADDRESS CITY - ST - ZIP	800005328388 -04328/02-01056-023 ***150.00***
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerome Silvey 3/21/02

Date

Daytime Phone #

203-422-777

CR2E034B (12/01)