

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 844554

1. Entity Name

SAILFISH POINT REALTY CORPORATION

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

05-24-2000 90176 048 \*\*\*158.75

Principal Place of Business

Mailing Address

1755 SE SAILFISH PT BLVD  
 STUART, FL 34996  
 US

2201 SE SAILFISH PT BLVD  
 STUART FL 34996-1911  
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Sailfish Point Realty Corp

3. Mailing Address

Suite, Apt. #, etc.

1048 SE Sailfish Pt Blvd.

Suite, Apt. #, etc.

Same

City & State

Stuart, FL

City & State

Stuart, FL

4. FEI Number

75-1675530

Applied For

Not Applicable

Zip

34996

Country

US

Zip

US

Country

US

5. Certificate of Status Desired

X

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITSON, WILLIAM C  
 2201 SE SAILFISH POINT BLVD  
 STUART FL 34996

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

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 VPTD  
 PERAINO, ROY  
 2201 SE SAILFISH POINT BLVD  
 STUART FL ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D  
 FRAME, DAVID  
 2201 SE Sailfish Point Blvd.  
 Stuart, FL 34996 ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 AT  
 PRESENT SUSAN  
 2201 SE SAILFISH PT BLVD  
 STUART FL 34996 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 PD  
 SPIEGEL JAMES  
 2201 SE SAILFISH PT BLVD  
 STUART FL 34996 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 VPS  
 LAFON TOM  
 2001 SE SAILFISH PT BLVD  
 STUART FL 34996 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D  
 CHOSNEK, IVAN  
 2201 SE SAILFISH PT BLVD  
 STUART FL 34996 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 D  
 MILDRED, RICK  
 2201 SE SAILFISH PT BLVD  
 STUART FL 34996 ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Susan Present*  
 SUSAN PRESENT

4/30/00

561-225-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X12