

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 28, 2000 08:00 AM  
Secretary of State

DOCUMENT # **A93000000589**

1. Entity Name  
CRYSTAL BAY CLUB, LTD.

Principal Place of Business 5601 WINDHOVER DRIVE ORLANDO FL 32819	Mailing Address 5601 WINDHOVER DRIVE ORLANDO FL 32819
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2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent

MARDER MICHAEL  
100 WEST CYPRESS CREEK RD., STE. 700  
FT. LAUDERDALE FL 33309 US

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE **04/28/2000**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. 1,452,229.00  
10. Amount of Capital Contributions in FLORIDA to date. 1,452,229.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	WESTGATE LAKES, INC.	5601 WINDHOVER DRIVE	ORLANDO FL 32819

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: THOMAS E. DUGAN

T 04/28/2000