## 2002 Uniform Business Report (UBR)

2002 Uniform Business Report (UBR)  DOCUMENT # F15796					FILED Apr 02, 2002 8:00 am Secretary of State			
1. Entity Name STATE OF THE STA						04-02-2002 90075		
Principal Plac	e of Business	Mailing Address						
14574 S.W. RAKE DRIVE P.O. BOX 335 INDIANTOWN FL 34956		14574 S.W. RAKE DRIVE P.O. BOX 335 INDIANTOWN FL 34956			j / <b>31</b> /			
2. Principal P	lace of Business	3. Mailing Address			11461			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat		City & State			4. FEI Numb	59-2253258	<del></del>	pplied For ot Applicable
Zip	Country Zip (		Country	5. Certificate of Status Desired S8.75 Additional Fee Required			ditional	
	6. Name and Address of Current Re		7. Name and Address of New Registered Agent					
ROBINSON & GREENBERG, P.A.				rnett Robinson, Jr., P.A. Addres (P.G. Box Number is 15th Assensable) 55 Glades Kd., Ste Assensable)				
2255 GLADES RD, SUITE 319 ATRIUM 1 BOCA PLACE			<del>-</del>	Boca Raton, FL 33431				
BOCA RATON FL 33431			City	FL Zip Code				ie
8. The above named entity aribmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE Signature report of proof name of egistered agent and little if applicable. (NOTE: Registered Agent signature required when reinstalling)  DATE								
Tax filing :	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta			10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees			
11/19/2016	いう 資本を行う OFFICERS AND DIF		12.			/CHANGES TO OFFICER		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LARGAY, CHARLES E NAME 9501 NW 106TH ST			President/Director Change Addition  9401 NW 106th St., Ste 101  Medley, FL 33178				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SILLS, RICHARD I. PGA NATL 17 COMMODORE PL PALM BCH GARDENS FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice	Pres:	ident	<b>☆</b> Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delētē · · ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Char 9401	les E. NW 10	Treasurer Largay, Ji O6th St., St., 33178	□ Change r. te 101	<b>⊠</b> Addition
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indicatod	certify that the information supplied with thi on this report or supplemental report is tru poration or the receiver or trustee empowe or on an attachment with an address, with	in and accurate and that my	cionaturo chall b	aug the co	ma lagal offa	at an if made under eath.	that I am an office	rordinactor i

SIGNATURE:

: SECRETARY