## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 16, 2002 8:00 am § Secretary of State DOCUMENT # K99972 1. Entity Name SEA OAKS YACHT CLÜB, INC. 05-16-2002 90047 030 \*\*\*150.00 Principal Place of Business Mailing Address 1235 WINDING OAKS CIRCLE 1501 COLLINS AVE VERO BEACH FL 32963 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0136461 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KWIAT, ANDREW 1501 COLLINS AVENUE THIRD FLOOR MIAMI BEACH FL 33139 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 This corporation is eligible to satisfy its Int. Tax filing requirement and elects to do so. e to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME MEUNIER, JEAN MARC NAME STREET ADDRESS 1501 COLLINS AVENUE, THIRD FLOOR STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME FAZILLEAN, ERIC NAME STREET ADDRESS 1501 COLLINS AVENUE, THIRD FLOOR STREET ADDRESS CITY-ST-7IP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GIEBEL, GEORGE NAME STREET ADDRESS 1501 COLLINS AVENUE, THIRD FLOOR STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME KWIAT, ANDREW NAME 1501 COLLINS AVENUE, THIRD FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAMĘ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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

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