

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L14319

1. Entity Name

HAMILTON CLUB DEVELOPMENT CORPORATION

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90196 028 ***150.00

Principal Place of Business

Mailing Address

365 5TH AVE S
STE 201
NAPLES FL 34102
US

365 5TH AVE S
STE 201
NAPLES FL 34102
US

000015

2. Principal Place of Business

3. Mailing Address c/o David Nassif Co.

195 Worcester Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 301

DO NOT WRITE IN THIS SPACE

City & State

City & State
Wellesley Hills, MA

4. FEI Number 58-1858016

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANTARAMIAN, JACK J.
365 5TH AVE S STE 201
NAPLES FL 34102

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, 2001 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
PDT
ANTARAMIAN, JACK J.
365 5TH AVE S, STE #201
NAPLES FL 34102 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
NASSIF, DAVID E.
365 5TH AVE S, STE #201
NAPLES FL 34102 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
195 Worcester Street-Suite 301
Wellesley Hills, MA 02481

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
WEINSTEIN, ROBERT W
125 SUMMER ST
BOSTON MA ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ 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: DAVID E. NASSIF

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)