

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90039 008 *****50.00

DOCUMENT # L95000000216

1. Entity Name

BAY POINTE YACHT & RACQUET CLUB DEVELOPMENT, L.C

Principal Place of Business

**6075 SUNSET DRIVE. #400
 MIAMI FL 33143**

Mailing Address

**6075 SUNSET DRIVE. #400
 MIAMI FL 33143**

2. Principal Place of Business

3. Mailing Address

780 NW Le Jeune Rd

Suite, Apt. #, etc.

#606

City & State

MIAMI, FL

Zip

33126

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0577012**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MAYOR, REYNALDO F
 6075 SUNSET DRIVE #400
 MIAMI FL 33143**

Name **Reynaldo F. Mayor**
 Street Address (P.O. Box Number is Not Acceptable)
780 NW Le Jeune Rd
#606
 City **MIAMI** FL Zip Code **33126**

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)

2/1/02
 DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	MGR	<input type="checkbox"/> Delete
NAME	MAYOR, REYNALDO F	
STREET ADDRESS	6075 SUNSET DR. #400	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	MEM	<input type="checkbox"/> Delete
NAME	WEBER, CHRISTIAN	
STREET ADDRESS	6075 SUNSET DR. #400	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reynaldo F. Mayor	
STREET ADDRESS	780 NW Le Jeune Rd #606	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE	MEM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Christian Weber	
STREET ADDRESS	780 NW Le Jeune Rd #606	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

2/1/02 (305) 741-6846

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #

CR2E083 (9/01)