

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M60522

1. Entity Name
VENTURA CLUB, INC.

Principal Place of Business
3500 WEST LANTANA ROAD
LANTANA FL 33462

Mailing Address
3500 WEST LANTANA ROAD
LANTANA FL 33462

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0008081

Applied For

Not Applicable

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

MEDEMA, ROGER E
3500 WN LANTANA RD
LANTANA FL 33462

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 4/05/01

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 PD
NAME MEDEMA, ROGER E.
STREET ADDRESS 4570 LAKE WORTH RD.
CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3500 West Lantana Road
CITY-ST-ZIP Lantana, Florida 33462

TITLE TDSV
NAME MEDEMA, MICHAEL W.
STREET ADDRESS 4570 LAKE WORTH RD.
CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3500 West Lantana Road
CITY-ST-ZIP Lantana, Florida 33462

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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

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, without other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Roger E. Medema, President

4/05/01 (561) 433-4507

Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)