

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90105 034 ****61.25

DOCUMENT # N00000000682

1. Entity Name

MIRASOL COUNTRY CLUB, INC.

MIRASOL GOLF CLUB, INC.

Principal Place of Business

2405 PIPER BOULEVARD
 NAPLES FL 34110

Mailing Address

2405 PIPER BOULEVARD
 NAPLES FL 34110

2. Principal Place of Business

6025 CARLTON LAKES BLVD

Suite, Apt. #, etc.

3. Mailing Address

6025 CARLTON LAKES BLVD

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

☒ 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

SWALM, MURRELL & SAMOUCÉ, P.A.
2375 TAMiami TRAIL NORTH
SUITE 308
NAPLES FL 34103

7. Name and Address of New Registered Agent

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **CLAUSSEN, ROBERT G**
 CITY-ST-ZIP **2405 PIPER BOULEVARD**
NAPLES FL 34110

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **MILARCIK, DON JR.**
 CITY-ST-ZIP **2405 PIPER BOULEVARD**
NAPLES FL 34110

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **STERLING, JACK**
 CITY-ST-ZIP **2405 PIPER BOULEVARD**
NAPLES FL 34110

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **6025 CARLTON LAKES BLVD**
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
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 STREET ADDRESS **6025 CARLTON LAKES BLVD**
 CITY-ST-ZIP

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12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Director
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/01
 Date

941-596-8067
 Daytime Phone #

CR2E037 (10/00)