

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 15, 2002 8:00 am**  
**Secretary of State**

04-15-2002 90024 005 \*\*\*\*61.25

**DOCUMENT # N00000001049**

1. Entity Name

**ATLANTIC COAST DINGHY CLUB, INC.**

Principal Place of Business

Mailing Address

**6445 NE 7TH AVENUE  
 MIAMI SHORES FL 33138**

**9215 NORTH BAYSHORE DR.  
 MIAMI SHORES FL 33138**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0961720**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33133**

**USA**

**33133**

**USA**

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

**O'MEARA, JAMES M  
 TRIPLE ANCHOR MARINE  
 13333 N.E. 17TH AVENUE  
 NORTH MIAMI FL 33181**

Name  
**DE LA VALETTE, LUIS**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4715 NE MIAMI CT.**


City  
**MIAMI, FLA**

FL

Zip Code  
**33137**

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

**DE LA VALETTE, LUIS** 

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

DATE

**4-1-02**

**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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 SPECIALE, CESARE  
 1041 NE 83 STREET  
 MIAMI FL 33138** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 FREYRE, EDGAR  
 2410 S.W. 28TH STREET  
 MIAMI FL 33133** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 AUMICK, FRED  
 970 N.E. 88TH STREET  
 MIAMI FL 33138** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 DE LA VALETTE, LUIS  
 4715 N.E. MIAMI COURT  
 MIAMI FL 33137** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 HILL, ED  
 6726 S.W. 128TH PLACE  
 MIAMI FL 33183** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 ULLMAN, GREGORY N  
 9215 NORTH BAYSHORE DRIVE  
 MIAMI FL 33138** ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 BARCHESKI, GLENN  
 2717 SW 22 AVE  
 MIAMI, FLA 33133** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 ANDREWS, TERRY  
 3203-McDONALD ST  
 MIAMI, FLA 33133** ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 SCOTT, ALAN  
 1430 WOODPECKER ST  
 HOMESTEAD, FLA 33035** ☐ Change ☒ Addition

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

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

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

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:

**DE LA VALETTE, LUIS**  **4/1/02** **305-205-1005**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E037 (9/01)

0022478