## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Jan 26, 2000 8:00 am Secretary of State DOCUMENT # N07344 1. Entity Name BEVERLY HILLS FISHING CLUB INC. 01-26-2000 90119 029 \*\*\*\*61.25 Principal Place of Business Mailing Address 3189 N. BRACKENFERN PT 3189 N. BRACKENFERN PT PO BOX 640523 PO BOX 640523 707222 **BEVERLY HILL FL 33464** BEVERLY HILLS FL 34464-0523 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2471767 Not Applic ...Country . ج**يد ۽ ۔ Zip** Country \$8.75 Additional •5.≂Certificate of Status Desired 🚐 🖘 🗔 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BALL Street Address (P.O. Box Number is Not Acceptable) LEE BALFI 3189 N. BRACKENFERN PT BEVERLY HILLS FL 34465 Zip Code City 超过20月期10日 FL 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. DP Change **Addition** ☐ Delete TITLE TITLE ANDROVICH, JOSEPH JOHN FYANK NAME NAME N. LAURELWOOD LOOP STREET ADDRESS 4291 N. LINCOLN AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BELLARLY HILLS FL 34465 BEVERLY HILLS FL 34465 ☐ Change Addition TITLE TITLE 🔀 Delete CHESTER P SOUT TO BUCKLEY, JOSEPH NAME NAME 131 W. HULLY FLORA PL -- -STREET ADDRESS STREET ADDRESS 6 S. DAVIS ST-CiTY-ST-ZIP FL 34465 CITY-ST-ZIP BEVERLY Hills **BEVERLY HILLS FL 34465** ☐ Change Addition ☐ Delete TITLE LEE BALL NAME MEYERS, JOHN NAME BRACKENFERN PT. STREET ADDRESS STREET ADDRESS 480 W. MILKWEED LOGO CITY-ST-ZIP Bevenly Hills 34465 CITY-ST-ZIP BEVERLY HILLS FL 34465 Change Addition TITLE 06 TITLE ☐ Delete SHIRLEY ROSMES 2989 H. BLAZINGSTAY WAY ZUELCH, EVELYN NAME NAME STREET ADDRESS STREET ADDRESS 4217 N. STEWART WAY CITY-ST-ZIP FL 34465 CITY-ST-ZIP BEVERLY HILLS FL 34465 ☐ Change Addition TITLE TITLE Delete. DOCHERTY **BRIGHT. BOB** NAME NAME W. SAND OAK CT 550 STREET ADDRESS STREET ADDRESS Truman blvd CITY-ST-ZIP Hills FL CITY-ST-ZIP 34465 BEVERLY HILLS FL ☐ Additior DVP ☐ Delete TITLE TITLE FRANK VITALE NAME NAME STREET ADDRESS l 655 W. Barrymore Dr. STREET ADDRESS CITY-ST-ZIP **BEVERLY HILLS FL** CITY-ST-ZIP

12. Thereby 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 of 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/8/00

(352) 746-1951

Daytime Phone #