2002 UNIFORM BUSINESS REPORT (UBR) FILED May 02, 2002 8:00 am Secretary of State **DOCUMENT # N22067** 1. Entity Name 05-02-2002 90048 037 ****70.00 INVERSITY CLUB OF BOCA RATON, INC. Principal Place of Business Mailing Address C/O DONALD E. ROSS C/O DONALD E. ROSS 3601 N. MILITARY TRAIL 3601 N. MILITARY TRAIL BOCA RATON FL 33431 **BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2840981 Not Applicable Zip Country 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 Street Address (P.O. Box Number is Not Acceptable) NOSS, DONALD E. 9601 N. MILITARY TRAIL **BOCA RATON FL 33431** Zip Code 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) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Addition CARVILLE, HUGH NAME NAME KNOX AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JOHNSTOWN NY 12095 CITY-ST-ZIP TITLE X Delete TITLE ☐ Change ☐ Addition COHEN, A. RICHARD NAME NAME **BOX 279** STREET ADDRESS STREET ADDRESS OLD FORGE NY 13420 CITY-ST-ZIP CITY-ST-ZIP #1 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NA∰E Landgren. Arthur e. STREET ADDRESS 2707 SW 6TH STREET STREET ADDRESS DELRAY BEACH FL 33445 CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE Change Addition MORTIMER, JOHN NAME NAME 2625 CONCORD PIKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **WILMINGTON DE 19803** CITY-ST-ZIP TITLE [X] Delete TITLE ☐ Change ☐ Addition ROBINO, FRANK A. NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Defete

SIGNATURE: By: SIGNATURE

5189 W WOODMILL DR #30

WILMINGTON DE 19808

16083 VIA MONTEVERDE

DELRAY BCH FL 33446

ROSS, DONALD E.

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-7IP

TITLE

NAME

Section 2 Marie Section 1

EDonald E. Ross

4/23/02

561 237-7824

301 237

X Change

☐ Addition

Date

ROSS, DONALD E. 2083 Thatch Palm Drive

Boca Raton, FL 33432