

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

0087513

DOCUMENT # N23860

1. Entity Name

NYC-LHNJ SOCIAL CLUB, INC.

04-11-2002 90708 036 ****61.25

Principal Place of Business

**BEV HILLS COMMUNITY CTR
BEV HILLS BLVD
BEVERLY HILLS FL 34465
US**

Mailing Address

**3876 N. GRAPEFERN WAY
BEVERLY HILLS FL 34465
US**

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

59-2855647

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

**HAFFEMAN, CHARLES
3876 N. GRAPEFERN WAY
BEVERLY HILLS FL 34465**

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

Charles E. Haffeman, Pres.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/5/02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **HAFFEMAN, CHARLES**
STREET ADDRESS **3876 N. GRAPEFERN WAY**
CITY-ST-ZIP **BEVERLY HILLS FL 34465**

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

TITLE ☒ Delete
NAME **SCHACK, ROBERT**
STREET ADDRESS **668 W. BUTTONBUSH LN**
CITY-ST-ZIP **BEV HILLS FL 34465**

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

TITLE ☐ Delete
NAME **BARTOW, BVD**
STREET ADDRESS **3784 N. MUSCADINE PATH**
CITY-ST-ZIP **BEVERLY HILLS FL 34465**

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

TITLE ☐ Delete
NAME **HAFFEMAN, EVELYN**
STREET ADDRESS **3876 N GRAPEFERN WAY**
CITY-ST-ZIP **BEVERLY HILLS FL 34465**

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

TITLE ☐ Delete
NAME **GRECO, GUSSIE MRS**
STREET ADDRESS **3399 N SUNROSE PATH**
CITY-ST-ZIP **BEVERLY HILLS FL 34465**

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

TITLE ☒ Delete
NAME **COURTNEY, GEORGE**
STREET ADDRESS **3331 N. SUNROSE PATH**
CITY-ST-ZIP **BEVERLY HILLS FL 34465**

TITLE ☐ Change ☐ Addition
NAME **D. BARTOW, LORA**
STREET ADDRESS **3784 N. MUSCADINE PATH**
CITY-ST-ZIP **BEVERLY HILLS, FL. 34465**

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 Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

April 2, 2002 3527463629

CR2E037 (9/01)