

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90213 044 ****61.25

DOCUMENT # N36989

1. Entity Name

ANCHOR BOAT CLUB, INC.

Principal Place of Business

% LINDA COHEN
 6 CHESNEY CT
 PALM COAST FL 32137
 US

Mailing Address

ANCHOR BOAT CLUB, INC.
 PO BOX 351501
 PALM COAST FL 32135-1501
 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

59-3047602

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

GUNTARP, PAUL M JR
185 CPYRESS PT PKWY
STE 6
PALM COAST FL 32164

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DC
COHEN, LINDA
6 CHESNEY CT
PALM COAST FL 32137 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DVC
MAYER, FRED
18 N. CLEARVIEW CT
PALM COAST FL 32137 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DS
BOHN, JANET
13 N. CLEARVIEW CT
PALM COAST FL 32137 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DS
SANGUINETTI, ANITA
17 Woodward Lane
Palm Coast, FL 32164 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DT
ERICKSON, BILL
16 WILLOUGHBY PL
PALM COAST FL 32164 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DT
MONDELLO, NICK
14 N. CLEARVIEW CT.
Palm Coast, FL 32137 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DRC
O'BRIEN, MARY
31 CHRISTOPHER CT
PALM COAST FL 32137 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DFC
BOHN, LOU
13 N. BLEARVIEW CT
PALM COAST FL 32137 ☐ Delete

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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/01

Date

Daytime Phone #

CR2E037 (10/00)