

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90005 014 ****61.25

DOCUMENT # N94000001912

1. Entity Name

PLANTATION JEEP CLUB, INC.

Principal Place of Business

Mailing Address

**15845 S. DIXIE HIGHWAY
 MIAMI FL 33157
 US**

**15895 S. DIXIE HIGHWAY
 MIAMI FL 33157
 US**

748738



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MCMILLAN, MARTY
 6300 PALM TRACE LANDING DRIVE
 #106
 LAVERIE FL 33314**

Name

CHARLES J. MARTIN

Street Address (P.O. Box Number is Not Acceptable)

8401 ROYAL PALM BLVD

City

CORAL SPRINGS

FL

Zip Code

33065

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 J. Martin

CHARLES J. MARTIN President

3-8-02

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 **PD** ☒ Delete
 NAME **MCMILLAN, MARTY**
 STREET ADDRESS **2419 WHALE HARBOR LANE**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

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

TITLE **DVP** ☐ Delete
 NAME **MARTIN, CHUCK**
 STREET ADDRESS **8401 ROYAL PALM BEACH BLVD.**
 CITY-ST-ZIP **CORAL SPRINGS FL 33065**

TITLE **PD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DS** ☒ Delete
 NAME **WATTERS, LEE**
 STREET ADDRESS **1929 NORTH 58TH WAY**
 CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **DS** ☒ Change ☒ Addition
 NAME **STEVENS, Cecelia**
 STREET ADDRESS **4490 NW 18th TERRACE**
 CITY-ST-ZIP **OAKLAND PARK, FL. 33309**

TITLE **TD** ☐ Delete
 NAME **MORALES, FRANK**
 STREET ADDRESS **6530 NW 44 CT**
 CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **DVP** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DT** ☐ Delete
 NAME **KAYE, MARTY**
 STREET ADDRESS **15895 S. DIXIE HWY.**
 CITY-ST-ZIP **MIAMI FL 33157**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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:

Charles J. Martin
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-02

Date

954-345-2933

Daytime Phone #

CR2E037 (9/01)