## **2001 UNIFORM BUSINESS REPORT (UBR)**

1/19/01-

## FILED Mar 20, 2001 8:00 am Secretary of State

DOCUMENT # N9400005073 1. Entity Name FORT MYERS BEACH OFFSHORE GRAND PRIX, INC. 01-19-2001 90024 032 \*\*\*\*61.25 Principal Place of Business Mailing Address 17200 SAN CARLOS BLVD. 17200 SAN CARLOS BLVD. FT. MYERS BEACH FL 33931 FT. MYERS BEACH FL 33931 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 65-0553485 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent High fil VONNE Street Address (P.O. Box Number & Not Acceptable WHALEY, THOMAS G 5<u>40</u> CANZIOS 17200 SAN CARLOS BLVD. FT. MYERS BEACH FL 33931 2ip Code 08 FT MYERS 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 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE TrabicsA ☐ Change Addition TITLE DEAN R. CLAUSEN -D BEASLEY, ROBERT MALIF NAME SAN KAZIOS Blud STREET ADDRESS 163i0-1 17200 SAN CARLOS BLVD STREET ADDRESS FL. CITY-ST-ZIP CITY-ST-ZIP FORT MYERS BEACH FL 33931 FT MYERS SECRETARY Triasurer D YUDANE High (11 - D 14310-1 SAN CARIOS BIUD Addition **M** Change ☐ Delete TITLE TITLE HIGHTILL, YVONNE NAME NAME STREET ADDRESS STREET ADDRESS 17200 SAN CARLOS BLVD CITY-ST-ZIP CITY-ST-ZIP FORT MYERS BEACH FL: 33931:-W1582 VICE President **Addition** Change Delete TITLE TITLE BOD MILANO - D 5370 CONGO CT WHALEY, THOMAS G NAME NAME 17200 SAN CARLOS BLVD. STREET ADDRESS STREET ADDRESS <u>33904</u> CITY-ST-ZIP CITY-ST-ZIP. FORT-MYERS BEACH FL 33931 FL ☐ Change Addition TITLE 🖼 Delete TITLE KISSEL WALTER NAME NAME STREET ADDRESS 17200 SAN CARLOS BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS BEACH FL 33931 ☐ Change ☐ Addition ☐ Delete TITLE TITLE MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE me NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-29 12. I hereby certify that the information supplied with this liling 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: