

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90261 040 ****61.25

DOCUMENT # N94000005204

1. Entity Name

PALOMA SOCIAL CLUB, INC.

Principal Place of Business

Mailing Address

9200 S MILITARY TR
 CLUB HOUSE
 BONTON BEACH FL 33436
 US

9200 S MILITARY TR
 CLUB HOUSE
 BONTON BEACH FL 33436
 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

65-0565528

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

YOLANDE ROY
9200 S MILITARY TR
#159
BOYNTON BEACH FL 33436

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 ☒ Delete
 NAME **D BOLDUS, LOUISE**
 STREET ADDRESS **9200 S MILITARY TRAIL #237**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☐ Change ☒ Addition
 NAME **RITA NEWBOWER**
 STREET ADDRESS **9200 S MILITARY TRAIL, #107**
 CITY-ST-ZIP **BOYNTON BEACH, FL. 33436**

TITLE ☒ Delete
 NAME **T CARON, DENISE**
 STREET ADDRESS **9200 MILITARY TRAIL #141**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☐ Change ☒ Addition
 NAME **SD SIMARD, LISE**
 STREET ADDRESS **9200 S MILITARY TRAIL, #57**
 CITY-ST-ZIP **BOYNTON BEACH, FL. 33436**

TITLE ☐ Delete
 NAME **P PREVOST, MICHAEL**
 STREET ADDRESS **9200 S MILITARY TRAIL #199**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☒ Change ☐ Addition
 NAME **P PREVOST, MICHAEL**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **V MOISAN, LAURETTE**
 STREET ADDRESS **9200 MILITARY TRAIL #096**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☒ Change ☐ Addition
 NAME **T LAURETTE MOISAN**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **SD ROY, YOLANDE**
 STREET ADDRESS **9200 MILITARY TR., #159**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☒ Change ☐ Addition
 NAME **P ROY, YOLANDE**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **D BEMNY, JEANNINE**
 STREET ADDRESS **9200 MILITARY TRAIL #119**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☐ Change ☒ Addition
 NAME **P TREMBLAY, PIERRETTE**
 STREET ADDRESS **9200 S MILITARY TRAIL, #138**
 CITY-ST-ZIP **BOYNTON BEACH, FL. 33436**

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:

Yolande Roy, President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APR 9/2002 561-731-2141

CR2E037 (9/01)