## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Jan 27, 2003 8:00 am Secretary of State DOCUMENT # N9500005090 01-27-2003 90198 006 \*\*\*\*61.25 1. Entity Name BEACON 21 BOAT CLUB, INC. Principal Place of Business Mailing Address 90010745 451 NE 14TH CT. 451 NE 14TH CT. STE #S43 STE #S43 JENSEN BEACH FL 34957 JENSEN BEACH FL 34957 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0659457 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DLABOLA, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 1451 NE 14TH CT #S43 JENSEN BEACH FL 34957 City 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. I am familiar with, and accept the obligations of registered agent. ٠., SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (10/02)Delete TITLE Change ☐ Addition TITLE LAMPLOUGH, JUNE NAME NAME 1667 NE Mautical PL #702 STREET ADDRESS 1556 NE BEACON DR. STE 1006 STREET ADDRESS CR2E037 CITY-ST-ZIP JENSEN BEACH FL 34957 CITY-ST-ZIP Addition TITLE Delete TITLE \_\_\_\_ Change DLABOLA, JOE NAME NAME STREET ADDRESS 1451 NE 14TH CT. STE. S43 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JENSEN BEACH FL 34957 Change Addition ☐ Delete TITLE TITLE HAHN, HARRY NAME NAME 1501 NE 13TH TERR #H13 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JENSEN BEACH FL 34957 TITLE Delete TITLE Change ☐ Addition RAIQUE, ALFRED NAME NAME STREET ADDRESS 1515 NE BEACON DR. #602 STREET ADDRESS CITY-ST-ZIE JENSEN BEACH FL 34957 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 embowered

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE:

TITLE

NAME STREET ADDRESS

☐ Delete

<u>/22/03</u>

**FILED** 

772.220.7658

☐ Change

☐ Addition