

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

0034437

02-07-2002 90033 050 ****61.25

DOCUMENT # N95000005425

1. Entity Name

GOLDEN HARBOUR YACHT CLUB, INC.

Principal Place of Business

6152 N. VERDE TRL
B108
BOCA RATON FL 33433
US

Mailing Address

21767 HIGH PINE TRAIL
BOCA RATON FL 33428
US

2. Principal Place of Business

1098 S.W. 21ST ST

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

Zip

Country

33486 Palm Beach

Zip

Country

4. FEI Number

65-0147432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UDLEY, EVERETT H JR
21767 HIGH PINE TRAIL
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above name submits this report for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

(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

TITLE	D	NAME	MIKITA, JOE	<input type="checkbox"/> Delete
STREET ADDRESS			3125 N. 7TH DR	
CITY-ST-ZIP			BOCA RATON FL 33431	
TITLE	D	NAME	ECKHOUSE, MARIE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			401 E LINTON BLVD APT 278	
CITY-ST-ZIP			DELRAY BEACH FL 33483	
TITLE	D	NAME	HERBERT, BERYL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			6152 N. VERDE TRAIL, #B108	
CITY-ST-ZIP			BOCA RATON FL 33433	
TITLE	D	NAME	JENSEN, ELEANOR	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			822 NE 71ST STREET	
CITY-ST-ZIP			BOCA RATON FL 33487	
TITLE	TD	NAME	BLANK, BETTY	<input type="checkbox"/> Delete
STREET ADDRESS			840 ENFIELD ST	
CITY-ST-ZIP			BOCA RATON FL 33487	
TITLE	D	NAME	MYLES, MILFORD	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			6377 CASABELLA LANE	
CITY-ST-ZIP			BOCA RATON FL 33433	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		NAME	MEREDITH, SYDNEY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			1098 S.W. 21ST STREET	
CITY-ST-ZIP			BOCA RATON, FL 33486	
TITLE		NAME	GREEN, EVELYN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			601 S. RIVERSIDE DR.	
CITY-ST-ZIP			POMPANO BEACH, FL 33062	
TITLE		NAME	BIEGER, BETTY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			732 COQUINA COURT	
CITY-ST-ZIP			BOCA RATON, FL 33432	
TITLE		NAME	HOLLAND, ROBERTA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			23343 BLUE WATER CIRCLE, #B112	
CITY-ST-ZIP			BOCA RATON, FL 33433	
TITLE		NAME	TODD, EMOGENE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			11826 NORTH LAKE DR.	
CITY-ST-ZIP			BOYNTON BEACH, FL 33436	
TITLE		NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

Betty M. Blank, Treasurer

SIGNATURE: *Betty M. Blank* SIGNATURE REQUIRED

1/21/02

561-997-7999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)