## 2000 UNIFORM BUSINESS REPORT (UBR)

## Feb 09, 2000 8:00 am DOCUMENT # N9700003844 Secretary of State BREEZY HILL RECREATION CLUB, INC. 02-09-2000 90005 011 \*\*\*\*70.00 Mailing Address Principal Place of Business BREEZY HILL MOBILE HOME AND R.V. PARK BREEZY HILL MOBILE HOME AND R.V. PARK 780 NE 47TH STREET 780 NE 47TH STREET POMPANO BEACH FL 33064 POMPANO BEACH FL 33064-4731 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 4. FEI Number 65-0771872 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) FREDKIN, HAROLD 780 NE 47 ST POMPANO BEACH FL 33064 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) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. DPT ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME FREDKIN, HAROLD STREET ADDRESS STREET ADDRESS 780 NE 47TH STREET CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33064 Delete TITLE 다'Change Addition DV TITLE $\mathsf{DV}$ NAME NAME SAPERSTONE, SYLVIA OUELLETTE, GERALD STREET ADDRESS STREET ADDRESS NE 47TH PLACE 745 NE 47TH COURT \_CITY-ST-ZIP.~ CITY-ST-ZIP\_ POMPANO-BEACH-FL-33064 -TITLE Change ☐ Addition ☐ Delete TITLE NAME ROCHFORD, DORIS NAME STREET ADDRESS STREET ADDRESS 653 NE 47TH PLACE CITY-ST-ZIP CITY-ST-ZIF POMPANO BEACH FL 33064 Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

HAROLD FREDKIN

changed, or on an attachment with an address, with all other like empowered