

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90308 050 ***150.00

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1. Entity Name

OCEAN CLUB RESORT REALTY GROUP, INC.



Principal Place of Business

**777 EAST PORT ROAD
RIVIERA BEACH FL 33404**

Mailing Address

**777 EAST PORT ROAD
RIVIERA BEACH FL 33404**

2. Principal Place of Business

550 Seabreeze Boulevard

Suite, Apt. #, etc.

3. Mailing Address

One East Eleventh Street

Suite, Apt. #, etc.

Suite 500

City & State

Ft. Lauderdale, Florida

City & State

Riviera Beach, Florida

Zip

33316

Country

U.S.A.

Zip

33404

Country

U.S.A.

4. FEI Number

65-0994967

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MASTRIANA, F. RONALD

1500 N FEDERAL HIGHWAY SUITE 200

FT LAUDERDALE FL 33304

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 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.

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **QUIGLEY, MICHAEL J III**
STREET ADDRESS **777 EAST POND ROAD**
CITY-ST-ZIP **WEST PALM BEACH FL 33404**

TITLE **DP** ☐ Delete
NAME **GOVEL, WILLIAM W**
STREET ADDRESS **777 EAST PORT ROAD**
CITY-ST-ZIP **WEST PALM BEACH FL 33404**

TITLE **DST** ☐ Delete
NAME **MURRAY, FRANCIS X**
STREET ADDRESS **777 EAST PORT ROAD**
CITY-ST-ZIP **WEST PALM BEACH FL 33404**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **Quigley, Michael J. III**
STREET ADDRESS **One East Eleventh Street, Suite 500**
CITY-ST-ZIP **Riviera Beach, Florida 33404**

TITLE **DP** ☒ Change ☐ Addition
NAME **William W. Govel**
STREET ADDRESS **550 Seabreeze Boulevard**
CITY-ST-ZIP **Ft. Lauderdale, Florida 33316**

TITLE **DST** ☒ Change ☐ Addition
NAME **Murray, Francis X.**
STREET ADDRESS **One East Eleventh Street, Suite 500**
CITY-ST-ZIP **Riviera Beach, Florida 33404**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 607, 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:

Francis X. Murray
SIGNATURE REQUIRED

April 15, 2003 561-845-2101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)