

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State
 02-15-2001 90069 027 ***150.00

028644

DOCUMENT # P32270

1. Entity Name

NICKLAUS PRODUCTIONS, INC.

Principal Place of Business

**11780 US HWY 1
 STE 300
 NORTH PALM BEACH FL 33408**

Mailing Address

**11780 US HWY 1
 STE 300
 NORTH PALM BEACH FL 33408**

717124

2. Principal Place of Business
11780 U.S. Highway One

3. Mailing Address
11780 U.S. Highway One

Suite, Apt. #, etc.
Suite 400

Suite, Apt. #, etc.
Suite 400

DO NOT WRITE IN THIS SPACE

City & State
North Palm Beach, FL

City & State
North Palm Beach, FL

4. FEI Number **59-2384382**

Applied For

Not Applicable

Zip
33408

Country
USA

Zip
33408

Country
USA

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

**FHS CORPORATE SERVICES, INC
 11780 U.S. HWY. ONE, SUITE 300
 NORTH PALM BEACH FL 33408**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CD
 NICKLAUS, JACK W.
 11780 U.S. HWY. ONE #400
 N. PALM BEACH FL** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**AS
 WORMAN, PAT
 11780 U.S. HWY. ONE #400
 NORTH PALM BEACH FL 33408** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PD
 BOWDEN, KEN
 56 HERMIT LANE
 WESTPORT CT** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPD
 SHERMAN, DAVID G.
 11780 U.S. HWY. ONE #400
 N. PALM BEACH FL** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPS
 BATES, JACK P.
 11780 U.S. HIGHWAY ONE, SUITE 400
 NORTH PALM BEACH FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**S
 BATES, JACK P.
 11780 U.S. Highway One, #400
 North Palm Beach, FL 33408** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**T
 JACOBSON, RON
 11780 U.S. HIGHWAY ONE, SUITE 400
 NORTH PALM BEACH FL** ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David G. Sherman
 David G. Sherman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/01

Date

501/626-3900

Daytime Phone #

CR2E034 (10/00)