2000 UNIFORM BUSINESS REPORT (UBR) Apr 29, 2000 8:00 am Secretary of State DOCUMENT # **P92000003569** TAVERN ON THE GREEN, BOCA RATON, INC. 04-29-2000 90008 048 ***150.00 Mailing Address Principal Place of Business 301 YAMATO ROAD 301 YAMATO ROAD #1201 #1201 **BOCA RATON FL 33429-4024 BOCA RATON FL 33487** 2. Principal Place of Business 3. Mailing Address 133C E Palmoth Park PD 133 C DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For 4. FEI Number City & State, 65-0367028 $\mathcal{E}_{\widetilde{\mathcal{M}}}$ Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired *ُ*مکر َ 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GESON, STEPHAN O. Box Number is Not Acceptable) Street Address (F 301 YAMATO RD. **SUITE 1201 BOCA RATON FL 33431** City 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. DATE gent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition D Defete TITLE TITLE **GESON, STEPHAN** NAME NAME <u>5</u> STREET ADDRESS 110 BOCA RATON RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Addition ☐ Delete TITLE ☐ Change TITLE SELBY, JOY NAME NAME STREET ADDRESS 110 BOCA RATON RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CUTY-ST-7JF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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: