

# 2001 UNIFORM BUSINESS REPORT (UBR)

1061

UBR 01

DOCUMENT # P95000041705

1. Entity Name  
ELDER & SONS GOLF ETC., INC.

APPROVED  
AND  
FILED

01 SEP 27 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FL



Principal Place of Business  
760 S BREVARD AVENUE  
#318  
COCOA BEACH FL 32931  
US

Mailing Address  
910 WELLS AVENUE  
ANNAPOLIS MD 21403  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3324455

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

ELDER  
ELDER, ROBERT L  
760 S BREVARD AVENUE  
#318  
COCOA BEACH FL 32931

Name  
Street Address (P.O. Box Number is Not Acceptable)  
300004625433-7  
-10/05/01--01073--022  
City \*\*\*\*150.00 FL \*\*\*\*150.00

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 \_\_\_\_\_ (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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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	P MADARY, MARK A 859 PINE VIEW AVENUE ROCKLEDGE FL 32955	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/17/01 410 263 4752  
Date Daytime Phone #

CR2E034 (5/01)

September 17, 2001

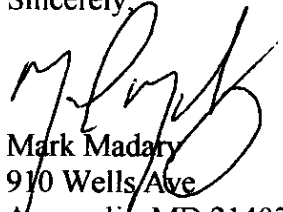
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302

To whom it may concern:

The uniform Business Reports mailed from your office to Elder & Sons Golf Etc., Inc. at 910 Wells Avenue have been mistakenly delivered to 910 Windsor Avenue by the Post Office. The September 12, 2001 notice is the first we have received to date. Therefore we have enclosed the standard fee of \$150.00 in order to keep our corporation active. The corporation has conducted no business to date and so no report is attached.

Thank you very much for your time and attention. We apologize for any inconvenience.

Sincerely,



Mark Madary  
910 Wells Ave  
Annapolis, MD 21403  
410-268-3946