2003 FOR PROFIT CORPORATION

May 02, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR** P97000031055 DOCUMENT # 1. Entity Name 05-02-2003 90367 040 ***150.00 GULF HARBOUR YACHT CLUB, INC. Principal Place of Business 14490 VISTA RIVER DRIVE Mailing Address 14490 VISTA RIVER DRIVE FORT MYERS FL 33908 FORT MYERS FL 33908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number 65-0749473 Not Applicable Zip Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CALLAWAY, GREG Street Address (P.O. Box Number is Not Acceptable) 13161 MCGREGOR BLVD #3A FORT MYERS FL 33919 City Zip Code FL 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Addition Delete CUSTER, GENE NAME NAME 11471 WELLFLEET DRIVE STREET ADDRESS STREET HODRES FY. MYERS FL 33908 CITY-ST-ZIP TY-ST-7IP ☐ Delete TITLE ☐ Addition TITLE Change : LITTLE, DENNIS NAME NAME .* 11413 LONGWATER CHASE CT STREET ADDRESS STREET ADDRESS FT MYERS FL 33908 CITY-ST-ZIE RC TITLE Delete TITLE - _ Change___ LADNER, BOB NAME NAME 11443 CAMPASS PT STREET ADDRESS STREET ADDRESS FORT MYERS FL 33908 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE PFEIFFER, VICTOR NAME NAME 14580 DORY LANE STREET ADDRESS STREET ADDRESS FT MYERS FL 33908 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition NAME WILLIAMS, BOB NAME STREET ADDRESS 628 LIGHTHOUSE WAY STREET ADDRESS SANIBEL FL 33957 CITY-ST-ZIP 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 as ess, with all other like empowered

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

FLEEGLE. VICTOR

FT MYERS FL 33908

11130 HARBOUR YACHT CIRCLE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Change

Addition