2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000080344

1. Entity Name

ELITE RESORTS OF AMERICA, INC. Principal Place of Business Mailing Address -- EAST HIGHWAY 316 P.O. BOX 5489

FILED Apr 25, 2000 8:00 am Secretary of State

04-25-2000 90031 014 ***150.00

-=:T SPRINGS FL 32134		Si	SALT SPRINGS FL 32134-5489									
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				1 18811881 118	DO NOT WF	1 2011) BEIS 12	itt 88148 ittit 418 1	11 8787 1881	
							·					
City & State			City & State		4. F	4. FEI Number 59-3470716				pplied For t Applicable		
Zip Country			Zip Count		try	5. 0	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						
MACKAY, DAVID L 2801 SW COLLEGE RD STE 1 OCALA FL 34474					Name							
					Street Address (P.O. Box Number is Not Acceptable)							
					City				FI	Zip Code	e	
8. The above	named entity submits this state	ment for the	e purpose of changing	its register	ed office or reg	gistered age	ent, or both,	in the State of F	lorida.			
CICALATURE											ĺ	
SIGNATURE .	Signature, typed or printed name of register	ed agent and tit	tle if applicable. (N	OTE: Registere	d Agent signature re	equired when rei	instating)		DATE		 _	
Tax filing requirement and elects to do so. After MAY				NOW!!! FEE IS \$150.00 1, 2000 Fee will be \$550.00 Payable to Department of St				ion Campaign F Fund Contributi		\$5.0 □ Added	O May Be I to Fees	
11.	OFFICER	S AND DIR	ECTORS	12.		AD	DITIONS/CI	HANGES TO OF	FICERS AN	D DIRECTOR	S IN 11	
TITLE	D		☐ Delete	TITL	-	· · ·				Change	Addition	
NAME	MAYER, EDUARD	_		NAM								
STREET ADDRESS CITY-ST-ZIP	25250 EAST HIGHWAY 310 SALT SPRINGS FL 32134	6			ET ADDRESS - ST-ZIP							
TITLE	D		☐ Delete	TITL						☐ Change	Addition	
NAME	MACKAY, GEORGE L			NAM	E							
STREET ADDRESS CITY-ST-ZIP	25250 EAST HIGHWAY 310 SALT SPRINGS FL 32134	6			ET ADDRESS -ST-ZIP			•				
TITLE	D	·-·	☐ Delete	TITL		<u></u>		'- -		☐ Change	Addition	
NAME	MAYER, ROBERT			NAM	E							
STREET ADDRESS	25250 E. HIGHWAY 316				ET ADORESS							
CITY-ST-ZIP	SALT SPRINGS FL 32134				-ST-ZIP							
TITLE NAME			☐ Delete	TITL: NAM						☐ Change	☐ Addition	
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NAME				NAM								
STREET ADDRESS					ET ADDRESS							
CITY-ST-ZIP				CITY	-ST-ZIP							

13. I hereby certify that the information supplied with this filing does not gualify 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: