

2002 UNIFORM BUSINESS REPORT (UBR)

P97000087207 **DOCUMENT #**

1. Entity Name

FIRST HARBOR CLUB DEVELOPMENT CORP.

Principal Place of Business 201 CLUBHOUSE DRIVE PALM COAST FL 32137

Mailing Address

201 CLUBHOUSE DRIVE PALM COAST FL 32137

2. Principal Place of Business			3. Mailing Address			i (40)(46)			e14) 18018 476	LI GENIT INCL ISET	
Suite, Apt. #, etc. City & State Zip Country			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
			City & State		4.	4. FEI Number 65-0802211				pplied For ot Applicable	}
			Zip	Country	ountry 5.				\$8.75 Additional Fee Required		
• •	6. Name and Add	Iress of Current Re	gistered Agent			Name and A	ddress of New	Registered A	gent]
				≥ Na	ne						-
	, JARED M			Street Address (P.O. Box Number is Not Acceptable)				
— ·	BHOUSE DRIVE										┨
PALM CO	DAST FL 32137						·			·	1
				City	<i>'</i>			FL	Zip Co	de	
8 The above	named entity submits	this statement for the	ne purpose of changing its	s reaistered offi	ce or registered as	gent, or both,	in the State of F	lorida.	<u> </u>		1
9. 1110 00010	That is a strictly constitution		5 0	v		-					
SIGNATURE _											
	Signature, typed or printed na	ame of registered agent and	title if applicable. (NOT	TE: Registered Agent	signature required when	reinstating)		DATE			4
19. This corporation is digital to detaily its interigible				/!!! FEE IS \$150.00		10. Elect	ion Campaign F	inancing	\$5.	00 May Be	
Tax filing requirement and elects to do so. (See criteria on back)			After May 1, 2002 Fee will be \$55 Make Check Payable to Department				Fund Contributi			ed to Fees	
<u></u>	a on back)					DOITIONS/C	HANGES TO OF	CICEDS AND	DIRECTO	25 IN 11	+
11.	DSC	OFFICERS AND DI		12.		DDITIONS/C	HANGES TO OF	PICENS AND	Change	Addition	15
TITLE NAME	MEYERS, HILLEL	_	☐ Delete	NAME							3
STREET ADDRESS	4875 PINETREE			STREET ADD	RESS						
CITY-ST-ZIP	MIAMI BEACH F	L 33140		CITY-ST-ZIF							1 5
TITLE	DPT		☐ Delete	TITLE					☐ Change	☐ Addition	13
NAME STREET ADDRESS 2514 FISHER ISLAND DR. BAYSIDE VILLA			DE MILAGE	NAME CTREET ARR	aree						
STREET ADDRESS CITY-ST-ZIP	2514 FISHER ISI FISHER ISLAND		DE VILLAGE	STREET ADD CITY-ST-ZIF	I	•					
	VPS.	T E 00 100				<u> </u>	 		Change	:Addition:	<u>- </u>
_TITLE NAME	MEYERS, JARED		1 Details	NAME						·	
STREET ADDRESS	201 CLUBHOUS			STREET ADD	RESS						
CITY-ST-ZIP	PALM COAST FI	_ 32137		CITY-ST-ZII	2				·		4
TITLE			☐ Delete	TITLE	: 1				☐ Change	Addition	Į
NAME	ļ			: NAME Street add	pree						l
STREET ADDRESS CITY-ST-ZIP				CITY-ST-ZII							Ì
TITLE			Delete	TITLE			.	<u> </u>	☐ Change	Addition	1
NAME			☐ Delete	NAME					_ •		}
STREET ADDRESS				STREET ADD	RESS						
CITY-ST-ZIP				CITY-ST-ZII							4
TITLE			☐ Delete	TITLE					☐ Change	☐ Addition	
NAME				NAME CTREET ADD	DECC						
STREET ADDRESS				STREET ADD							

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 AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #