

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000015348

1. Entity Name

SOUTHERN CROSS STABLES, INC.

R

FILED

Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90008 009 ***158.75

Principal Place of Business

17770 WAGON WHEEL DRIVE
BOCA RATON FL 33496

Mailing Address

17770 WAGON WHEEL DRIVE
BOCA RATON FL 33496

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0915563

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLUCKSON, BROOKE L
17770 WAGON WHEEL DRIVE
BOCA RATON FL 33496

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(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)

X

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

X

\$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
D
GLUCKSON, BROOKE L
17770 WAGON WHEEL DRIVE
BOCA RATON FL 33496

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
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Change Addition

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Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
D# ~~000~~ 0000151348
DW76028

RGF HOLDING CORP.
222 Phipps Plaza
Palm Beach, FL 33480
Tel: 561-833-9962 • Fax: 561-366-8366

COPY

VIA REGULAR MAIL

July 14, 2000

COPY

Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-150

Re: Document Number F95000002716

To Whom It May Concern:

Please be advised that we did not receive the first request for the 2000 Uniform Business Report, please abate the \$400 late fee. In anticipation we are enclosing a check in the amount of \$150.00 to cover the filing fee. Thank you.

Should you have any questions, please do not hesitate to contact me at 561-620-5500.

Sincerely,

Lawrence E. Grogan
Chief Financial Officer