

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90007 023 ***150.00

DOCUMENT # P99000051013

1. Entity Name

TROPHY CLUB AT THE STRAND, INC.

Principal Place of Business

**4771 ALBERTON COURT
 3502
 NAPLES FL 34105**

Mailing Address

**4771 ALBERTON COURT
 3502
 NAPLES FL 34105**

2. Principal Place of Business

4770 Alberton Court

3. Mailing Address

4770 Alberton Court

Suite, Apt. #, etc.
#2602

Suite, Apt. #, etc.
#2602

City & State
Naples, FL

City & State
Naples, FL

Zip
34105

Country
U.S.A.

Zip
34105

Country
U.S.A.

4. FEI Number **59-3581250**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BATEMAN, ARTHUR L
 4771 ALBERTON CRT. #3502
 NAPLES FL 34105**

7. Name and Address of New Registered Agent

Name
Bateman, Arthur L.
 Street Address (P.O. Box Number is Not Acceptable)
4770 Alberton Court, #2602
 City **Naples** **FL** Zip Code **34105**

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]

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

(NOTE: Registered Agent signature required when reinstating)

3/13/02

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BATEMAN, ARTHUR L 4771 ALBERTON CRT. #3502 NAPLES FL 34105 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Bateman, Arthur L. 4770 Alberton Court, #2602 Naples, FL 34105 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/02

Date

(239) 430-1012

Daytime Phone #

CR2E034 (9/01)