

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S86060

1. Entity Name

COUNTRY CLUB PROPERTIES, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90042 029 ***150.00

Principal Place of Business Mailing Address
2325 ULMERTON RD 2325 ULMERTON RD
FEATHER SOUND SQUARE SHOPPING CENTER #11 FEATHER SOUND SQUARE SHOPPING CENTER #11
CLEARWATER FL 34622 CLEARWATER FL 33762-2282

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3090056

Applied For

Not Applicable

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

TEACHER, RICHARD D SR
700 31 AVE N
SAINT PETERSBURG FL 33704

Name

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

13602 Frigate Court #103

City

Clearwater

FL

Zip Code

33762

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)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME TEACHER, RICHARD D SR
STREET ADDRESS 700 31 AVE N
CITY-ST-ZIP SAINT PETERSBURG FL 33704

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 13602 Frigate Court #103
CITY-ST-ZIP Clearwater, FL 33762

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #

1-90-00

(727) 573-3333

CR2E034 (9/99)