## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V45834

111

## **FILED** Mar 10 1998 8:00am Secretary of State

1. Corporatio	COAST FIELD CLUB, INC.	(1)							
Principal Plac	e of Business	Mailing Address				I TOBAF OKANA BIDAK BINDI NOODO ANII	STEL BIELL BIEL		
7290 - 424 COLLEGE PARKWAY		C/O BMCO 126 E. 56TH ST.							
SUITE 424 FT. MYERS FL 33907		10TH FLOOR				DO NOT WRITE IN THIS SPACE			
FT. MYERS F US	£ 33907	NEW YORK NY 10022 US			- }-	3. Date Incorporated or Qualified			
••		00				06/24/1992	u		•
	lace of Business	2a. Mailing Address				4. FEI Number		A	oplied For
	ollege Packway	[26]				<u>65-0342247</u>			ot Applicable
Suite, Apt.	#, etc. . 38	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Stat	(e ,,	City & State				8. Election Campaign Financing	····		May Be
23 Ft. 1	Myrrs FL	28				Trust Fund Contribution			to Fees
Zip 284	Country USA	Zip	Country	•	] ;	<ol><li>This corporation owes or has</li></ol>			
24 3390	9. Name and Address of Curren	29]	30			Personal Property Tax due Ju		<b>3</b> C	_l No
		t Hegistered Agent	81	Name	1	0. Name and Address of New	Keğistered	Agent	
	.rdner, merritt a. 1 e. Kennedy Blvd.								
SUITE 2700			82	Street	Address	(P.O. Box Number is Not Accep	table)		
	MPA FL 33602		83						
			84	City		*****		les Zin	Code
			04	City			FL	.  85   Zip	Code
office or r agent. La	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607.1508, Florida Stati of Florida Such change was thous of, Section 607.0505, F	utes, the above authorized by Torida Statutes	e-named the corp s.	corporat poration's	ion submits this statement for th s board of directors. I hereby ac	e purpose o cept the app	f changing i pointment as	ts registered registered
SIGNATURE	Signature, typod is printed rank of registered ago	nt and the diapplicable (NC	Tt Registered Age	ni signature	required wh	non reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN		
T∏L€	PD DELETE			1.1 TITLE				Change	Addition
NAME	VAN CLIEF, MARY ANN 7290 424 COLLEGE PARKWA	v	1.2 NAME	******	7181	College Packway	- Suit	e 38	
STREET ADDRESS	FT MYERS FL	11	1.3 STREET		E+ A		3907		
CITY-ST-ZIP	ST	DELETE	1.4 City - S 2.1 Tible	1-29	1	TIYERS, FI	13701	Change	Addition
NAME	PEREIRA, JEANETTE		4	2.2 NAME					
STREET ADDRESS	126 EAST 56 ST.		2.3 STREET	ADDRESS					Ì
CITY-ST-ZIP	NEW YORK NY		2. 4 CITY -	ST-ZIP					
TITLE	AVP	☐ DELETE	3.1 TITLE					Change	Addition
NAME	HALL, VALERIE A.		3 2 NAME			04.00		J ~-	
STREET ADDRESS	7290-424 COLLEGE PARKWA	Y	3.3 STREET		7181		ay, Ju	.de 38	
CITY-ST-ZIP	FT. MYERS FL	DILETE	3.4. CITY - 5	T-ZIP	rt,	Myers, FL 33	907	Change	Addition
TITLE	}		4.1 TITLE 4.2 NAME	ļ	1	į.		C) Change	רים אמטונוטרו
NAME Street Address			4.2 NAME 4.3 STREET	ADDDECC					
CITY-ST-ZIP			4.3 STREET		i				
TITLE		DELETE	5.1 TITLE	1- EN		* *************************************		Change	Addition
NAME :			5.2 NAME					<b>-</b>	_ }
STREET ADDRESS			5.3 STREET	address					
CITY - ST - ZIP			5.4 CITY - S						
TITLE		DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME	İ	1				
STREET ADDRESS			6 3 STREET	ADDRESS	ļ				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP					

14. Thereby 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

MALY ANN VAN CLIEF

SIGNATURE:

MALY ANN VAN CLIEF

PRESIDEND

3/2/49

(212)644-0774

MARY ANN VAN CLIEF)
PRESIDEND