2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # N01320** Jul 26, 2000 8:00 am 1. Entity Name **Secretary of State** OAKS CLUB CORPORATION 07-26-2000 90014 037 ****61.25 Mailing Address Principal Place of Business 301 MAC EWEN DR 301 MAC EWEN DR OSPREY FL 34229 OSPREY FL 34229 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2369514 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired ** Fee Required ≈7.7 Name and Address of New Registered Agent == 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROBINSON, ROB 22 SOUTH TUTTLE AVE., STE. 3 SARASOTA FL 34237 City 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change Addition TITLE X Detete TITLE ROSS CLOUSTON RIVOLTA, PIERO NAME NAME 301 MACEWEN DR. 301 MAC EWEN DR STREET ADDRESS STREET ADDRESS OSPREY, FL. 34229 CITY-ST-ZIP CITY-ST-ZIP OSPREY FL Addition Delete TITLE ☐ Change TITLE FRANK HEIT RIVOLTA, RENZO NAME NAME 301 MACEUEN DR STREET ADDRESS 301 MACEWEN DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OSPRELIEL 34229 OSPREY FL 34229 **⊠** Delete TITLE ☐ Change Addition A TITLE MARTHA THORNTON SCHMELZINGER, MONICA NAME NAME 301 MACEWEN DR. STREET ADDRESS STREET ADDRESS 301 MAC EWEN DR OSPREY, PL. 34229 CITY-ST-ZIP OSPREY FL 34229 CITY-ST-ZIP ☐ Defete TITLE Change Addition TITLE NAME JAMES HORAN NAME 301 MACEWEN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Spell, G. 34229 CITY-ST-ZIP ☐ Delete Change | Addition TITLE TITLE ARTHUR ROUSE NAME NAME 301 MACEUEN DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP OSPRIAL, FL. 34229 CITY-ST-ZIP ☐ Change Addition ☐ Detete TITLE KENNETH SCHEPPELE NAME NAME 301 MACEWEN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OSPREY, FL-34229

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment will an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



OAKS CLUB CORPORATION
59-2369514
ADDITIONS TO 2000 UNIFORM BUSINESS REPORT

D GAIL PETRYKANYN 301 MACEWEN DR OSPREY, FL 34229

D LEONARD SMOLER 301 MACEWEN DR OSPREY, FL 34229

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