

ORIGINAL

030779-TC

CK053046

#100.00

MAC

1. Name of company or name of individual (not fictitious name or d/b/a):
THE EVERGLADES CLUB, INC.

2. Name under which applicant will do business (fictitious name, etc.):
THE EVERGLADES CLUB, INC.

3. Official mailing address:

Street: 356 WORTH AVE

P.O. Box: _____

City: PALM BEACH

State: FL Zip: 33480

COMMISSION
CLERK

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4. Florida address:

Street: 356 WORTH AVE

P.O. Box: _____

City: PALM BEACH

State: FL Zip: 33480

5. Structure of organization:

() Individual

() Corporation

() General Partnership

() Limited Partnership

() Other: _____

DEPOSIT DATE

D 374 AUG 08 2003

6. If incorporated in Florida, provide proof of authority to operate in Florida:

Florida Secretary of State

Corporate Registration Number: 132308

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC _____
- OTH _____

Form PSC/CMU-32 (02/99)

Required by Commission Rule Nos. 25-24.510 & 25-24.511

File Name: cmu-32.doc

DOCUMENT NUMBER-DATE

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