

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90057 026 ***150.00

DOCUMENT # 605246

1. Entity Name
BAHAMA FAMILY ISLAND PROMOTION BOARD, INC.

Principal Place of Business
19495 BISCAYNE BLVD
809
AVENTURA FL 33180
US

Mailing Address
19495 BISCAYNE BLVD
809
AVENTURA FL 33180
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1881976**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KOCH, BARBARA L.
19495 BISCAYNE BLVD
SUITE 809
AVENTURA FL 33180

Name

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

City

FL

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

(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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☒ Delete
NAME	MULLIN, GEORGE	
STREET ADDRESS	THE COVE ELEUTHEVA	
CITY-ST-ZIP	ELEUTHEVA, BAHAMAS	
TITLE	D	☒ Delete
NAME	ALBURY, MONTY	
STREET ADDRESS	GREEN TURTLE CLUB	
CITY-ST-ZIP	ABACO, BAHAMAS	
TITLE	T	☐ Delete
NAME	MISKE, ROBERT	
STREET ADDRESS	TREASURE CAY HOTEL	
CITY-ST-ZIP	TREASURE CAY, ABACO, BAHAMAS	
TITLE	P	☐ Delete
NAME	SYMONETTE, NETTIE	
STREET ADDRESS	DIFFERENT OF ABACO	
CITY-ST-ZIP	CAUARINA PT, ABACO, BAHAMAS	
TITLE	T	☒ Delete
NAME	ROBERTS, CRAIG	
STREET ADDRESS	TREASURE CAY RESORT	
CITY-ST-ZIP	ABACO, BAHAMAS	
TITLE	VP	☐ Delete
NAME	ALEXIOU, MANNY	
STREET ADDRESS	ABACO BEAD RESORT	
CITY-ST-ZIP	MARSH HARBOUR, ABACO BAHAMAS	

TITLE	Director	☐ Change ☒ Addition
NAME	Barry Benjamin	
STREET ADDRESS	Peace & Plenty	
CITY-ST-ZIP	George town, Exuma, Bahamas	
TITLE	Director	☐ Change ☒ Addition
NAME	Jim Nawn	
STREET ADDRESS	Green Turtle Club	
CITY-ST-ZIP	Green Turtle Cay, Abaco, Bahamas	
TITLE	Meister, Robert	☒ Change ☐ Addition
TITLE	Director	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President	☐ Change ☒ Addition
NAME	Jeff Birch	
STREET ADDRESS	Small Hope Bay Lodge	
CITY-ST-ZIP	Fresh Creek, Andros, Bahamas	
TITLE	President	☒ 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)