## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # N49037**

1. Entity Name

## **FILED** Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90402 031 \*\*\*\*61.25

N'S NATURE COAST CONSE	RVANCY, INC.							
P O BOX 401 P O								
Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_				
-1						KING CHANGES	8	
City & State		City & State		4. FEI Number 59-3118685			pplied For lot Applicable	
Country	Zip	Country		5. Certificate of Stat	us Desired $\square$	\$8.75 Ac	Iditional	
6. Name and Address of Curre	nt Registered Agent		į	7. Name and Addre			ed	
		Name			I Topisto	oo Agent		
CRANE, ROBERT B.			Street Address (P.O. Box Number is Not Acceptable)					
KEY FL 32625		-			····	·		
		City	<u>.</u>	<del></del>		FL Zip Coo	de	
e named entity submits this statement	for the purpose of changing its	registered office or	registere	ed agent, or both, in the	e State of Florida. I	am familiar with,	and accept	
Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered Agent signatur	e required v	when reinstating)	DA	TE.		
Trust Fund Contr								
	****	11.	Al	DDITIONS/CHANGES	TO OFFICERS AND	DIRECTORS IN	J 10	
CRANE, CAPT. ROBERT B. 16851 MARGERY ST	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				☐ Change	☐ Addition	
VD HITT, TERRENCE PO BOX 218	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		* <b>%</b> -		☐ Change	Addition	
TD ROQUEMORE, DAVID 11571 SW 154TH AVE	☐ Delete	NAME STREET ADDRESS	115°	DEMORE, T	>AVI) A-6	<b>™</b> Change	☐ Addition	
SD STARNES, EARL M SHELLCREST AVE CEDAR KEY FL 32625	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Change	☐ Addition	
D HOLLING, C.S. 16871 STURGIS CIR	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-7IP				☐ Change	Addition	
OLDAN ILL FL 32023		OTT I - OT - ZIF						
	Place of Business  If L 32625  Place of Business  It. #, etc.  Atte  Country  6. Name and Address of Current  ROBERT B.  MARGERY ST.  KEY FL 32625  e named entity submits this statement ations of registered agent.  Signature, typed or printed name of registered age  FILE NOW: FEE IS \$61.25  OFFICERS AND DE  PD  CRANE, CAPT. ROBERT B.  16851 MARGERY ST  CEDAR KEY FL 32625  VD  HITT, TERRENCE  PO BOX 218  CEDAR KEY FL 32525  TD  ROQUEMORE, DAVID  11571 SW 154TH AVE  CEDAR KEY FL 32625  SD  STARNES, EARL M  SHELLCREST AVE  CEDAR KEY FL 32625  D  HOLLING, C.S.	P O BOX 401 CEDAR KEY FL 32625  Place of Business  3. Mailing Address  1. #, etc.  Suite, Apt. #, etc.  Country  Zip  6. Name and Address of Current Registered Agent  ROBERT B. IARGERY ST. KEY FL 32625  e named entity submits this statement for the purpose of changing its ations of registered agent.  Signature, typed or printed name of registered agent and title if applicable.  (NOT)  FILE NOW: FEE IS \$61.25  PD  OFFICERS AND DIRECTORS  PD  CRANE, CAPT. ROBERT B. 16851 MARGERY ST CEDAR KEY FL 32625  VD  Delete  HITT, TERRENCE PO BOX 218 CEDAR KEY FL 32525  TD  ROQUEMORE, DAVID 11571 SW 154TH AVE CEDAR KEY FL 32625  SD  Delete  Delete  Delete  Delete  TARNES, EARL M SHELLCREST AVE CEDAR KEY FL 32625  D  HOLLING, C.S. 16871 STURGIS CIR	Acce of Business  P O BOX 401 CEDAR KEY FL 32625  Place of Business  3. Mailing Address P O BOX 401 CEDAR KEY FL 32625  Place of Business  3. Mailing Address  City & State  Country  2ip Country  6. Name and Address of Current Registered Agent  Name ROBERT B. IARGERY ST. KEY FL 32625  City e named entity submits this statement for the purpose of changing its registered office or attons of registered agent.  Signature, typed or printed name of registered agent and title if applicable.  NOTE: Registered Agent signature  (NOTE: Registered Agent signature)  FILE NOW: FEE IS \$61.25  Signature, typed or printed name of registered agent and title if applicable.  NOTE: Registered Agent signature  (NOTE: Registered Agent signature)  FILE NOW: FEE IS \$61.25  11.  PD CRANE, CAPT. ROBERT B. 16851 MARGERY ST CEDAR KEY FL 32625  VD Delete  TITLE NAME STREET ADDRESS CITY: ST-2P TO BOX 218 CEDAR KEY FL 32525  TD Delete TITLE NAME STREET ADDRESS CITY: ST-2P TO Delete TITLE NAME STREET ADDRESS STARNES, EARL M SHELLCREST AVE CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY: ST-2P TO Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY: ST-2P TO Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY: ST-2P TO Delete TITLE NAME STREET ADDRESS	Acc of Business  R 32625  P O BOX 401 CEDAR KEY FL 32625  Place of Business  3. Mailing Address  P. O BOX 401 CEDAR KEY FL 32625  Place of Business  3. Mailing Address  3. Mailing Address  R. etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  And Country  Country  6. Name and Address of Current Registered Agent  ROBERT B. ARROERY ST. KEY FL 32625  City  e named entity submits this statement for the purpose of changing its registered office or registered atons of registered agent.  Signature, hyped or printed name of registered agent and title if applicable.  FILE NOW: FEE IS \$61.25  P. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  P. Election Campaign Financing Trust Fund Contribution.  Delete MAKE STREET ADDRESS CITY-ST-2P  VD HITT, TERRENCE PO BOX 218 CEDAR KEY FL 32625  VD HITT, TERRENCE PO BOX 218 CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete TITLE NAME STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625  D Delete STREET ADDRESS CITY-ST-2P  CEDAR KEY FL 32625	Accord Business  R. 25625  Place of Business  Askilling Address P. O. 80X 401 CEDAR KEY FL. 25625  Place of Business  3. Mailing Address P. O. 80X 401 CEDAR KEY FL. 25625  Delete City & State  Country Country Country Country Country S. Certificate of State  A. FEI Number 59 Country S. Certificate of State  ROBERT B. ARGERY ST. KEY FL. 32625  City City City City City City City Cit	Acc of Business  PL 3825  PL 50 BOX AD CEDAR KEY FL 3825  Place of Business  J. Mailing Address  J. Mailin	Assignment for the purpose of changing its regulatered diffice or registered agent, or both, in the State of Florida. I am familiar with nitriors of registered agent.    File Now: FEE IS \$61.25   S. Election Companing its regulatered diffice or registered agent, or both, in the State of Florida. I am familiar with nitriors of registered agent.    P. Detect   S. De	

r nereby 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

SIGNATURE:

BEOURISERFB CRANE PRES- 1/9/03 352-543-6352