

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004802

1. Entity Name

HERNANDO BEACH BOATLIFT & IMPROVEMENTS, INC.

Principal Place of Business

4009 SHAOL LINE BLVD
HERNANDO BEACH FL 34607
US

Mailing Address

4009 SHAOL LINE BLVD
HERNANDO BEACH FL 34607
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3210129

Applied For

Not Applicable

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

MANCUSI, JOSEPH
3191 SHOAL LINE BLVD
HERNANDO BEACH FL 34607

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

Joseph A. Mancusi
Signature, typed or printed name of registered agent and title if applicable

Pres.
(NOTE: Registered Agent signature required when reinstating)

3/19/01
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MANCUSI, JOSEPH
STREET ADDRESS 3191 SHOAL LINE BLVD
CITY-ST-ZIP HERNANDO BEACH FL 34607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME HOSLEY, GEOFFREY
STREET ADDRESS 3317 OLEANDER DR
CITY-ST-ZIP HERNANDO BEACH FL 34607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME MOORE, GLADYS
STREET ADDRESS 4049 HERMOSA BLVD
CITY-ST-ZIP HERNANDO BEACH FL 34607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME BURKWIST, DAVID
STREET ADDRESS 480 CASTILLE
CITY-ST-ZIP SPRING HILL FL 34606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME JOHNSON, LEWIS
STREET ADDRESS 3504 SHEEPHEAD DR
CITY-ST-ZIP HERNANDO BEACH FL 34607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME GRANNAULA, TONI
STREET ADDRESS 3520 CROAKER DR
CITY-ST-ZIP HERNANDO BEACH FL 34607 ☒ Delete

TITLE D
NAME *Westerberg, Thomas*
STREET ADDRESS *4025 Amberjack Dr.*
CITY-ST-ZIP *Hernando Beach, FL 34607* ☒ Change ☐ Addition

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 with an address, with all other like empowered.

SIGNATURE:

Joseph A. Mancusi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/01 *352-596-8382*
Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)