

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000000267

1. Entity Name

SAILFISH POINT UTILITY CORPORATION

Principal Place of Business

2201 SOUTH EAST SAILFISH POINT BLVD.
STUART FL 34996

Mailing Address

2201 SOUTH EAST SAILFISH POINT BLVD.
STUART FL 34996-1911

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

65-0856397

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

WHITSON, WILLIAM C
2201 SOUTH EAST SAILFISH POINT BLVD.
STUART FL 34996

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

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

(NOTE: Registered Agent signature required when reinstating)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
KAPLAN, JAY G
2201 SE SAILFISH PT BLVD
STUART FL 34996 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KENNEDY, JOHN
2201 SE SAILFISH PT BLVD.
STUART, FL 34996 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WATSON, H M
2201 SOUTH EAST SAILFISH POINT BLVD.
STUART FL 34996 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
GOLDEN, ALAN
2201 SE SAILFISH PT BLVD
STUART FL 34996 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
SALVATORI, ANNE
2201 SE SAILFISH PT BLVD
STUART FL 34996 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
PRESENT, SUSAN
2201 SE SAILFISH PT BLVD
STUART FL 34996 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

Susan Present
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90109 001 ***210.00



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)

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3/27/00