

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000046361

FILED
Feb 18, 2003
Secretary of State

Entity Name: CRUISE FAMILY INC.

Current Principal Place of Business:

5240 JUBILEE WAY
MARGATE, FL 33063

New Principal Place of Business:

3404 ORINOCO LANE
MARGATE, FL 33063

Current Mailing Address:

5240 JUBILEE WAY
MARGATE, FL 33063

New Mailing Address:

3404 ORINOCO LANE
MARGATE, FL 33063

FEI Number: 82-0552047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSNER, CHRIS L
5240 JUBILEE WAY
MARGATE, FL 33063

Name and Address of New Registered Agent:

GASSNER, AUDREY V
3404 ORINOCO LANE
MARGATE, FL 33063

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: AUDREY GASSNER

02/18/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GASSNER, CHRIS L
Address: 5240 JUBILEE WAY
City-St-Zip: MARGATE, FL 33063

Title: V () Delete
Name: GASSNER, AUDREY V
Address: 5240 JUBILEE WAY
City-St-Zip: MARGATE, FL 33063

Title: S (X) Delete
Name: BARSON, LINDA E
Address: 3404 ORINOCO LANE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GASSNER, AUDREY V
Address: 3404 ORINOCO LANE
City-St-Zip: MARGATE, FL 33063

Title: V (X) Change () Addition
Name: BARSON, LINDA E
Address: 3404 ORINOCO LANE
City-St-Zip: MARGATE, FL 33063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AUDREY GASSNER

PRES

02/18/2003

Electronic Signature of Signing Officer or Director

Date