

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


**FILED**  
**Apr 04, 2003 8:00 am**  
**Secretary of State**

04-04-2003 90087 018 \*\*\*150.00

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**DOCUMENT # P94000040114**

1. Entity Name  
**COLUMBO YACHTS, INC.**



Principal Place of Business  
**1020 N.W. 62ND ST  
HANGER 12  
FORT LAUDERDALE FL 33309  
US**

Mailing Address  
**1020 N.W. 62ND ST  
HANGER 12  
FORT LAUDERDALE FL 33309  
US**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
**6101 N.W. 10TH TERRACE**

3. Mailing Address  
**6101 N.W. 10TH TERRACE**

Suite, Apt. #, etc.

City & State  
**FORT LAUDERDALE, FL**

City & State  
**FORT LAUDERDALE, FL**

Zip  
**33309**

Country  
**U.S.A.**

Zip  
**33309**

Country  
**U.S.A.**

4. FEI Number **59-3244884**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PATTERSON, RICHARD B  
1020 N.W. 62ND ST  
HANGER 12  
FORT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name  
**PATTERSON, RICHARD B.**

Street Address (P.O. Box Number is Not Acceptable)  
**6101 N.W. 10TH TERRACE**

City  
**FORT LAUDERDALE**

FL Zip Code  
**33309**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Richard B. Patterson* - **RICHARD B. PATTERSON, - V.P.** **4/1/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD HUTCHINGS, JAMES L. 1020 N.W. 62ND ST HANGAR 12 FORT LAUDERDALE FL 33309 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HUTCHINGS, BARBARA J. 1020 N.W. 62ND ST HANGAR 12 FORT LAUDERDALE FL 33309 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUTCHINGS, RONALD J. 1020 N.W. 62ND ST HANGAR 12 FORT LAUDERDALE FL 33309 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATTERSON, RICHARD B. 1020 N.W. 62ND ST HANGAR 12 FORT LAUDERDALE FL 33309 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD HUTCHINGS, JAMES L. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HUTCHINGS, BARBARA J. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUTCHINGS, RONALD J. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATTERSON, RICHARD B. 6101 N.W. 10TH TERRACE FORT LAUDERDALE, FL 33309 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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: *Richard B. Patterson* **RICHARD B. PATTERSON - V.P.** **4/1/03** **954-958-9866**

Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)