

2000 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90086 049 ***150.00

DOCUMENT # P97000047777

1. Entity Name

QUALITY BOATS OF CLEARWATER, INC.

Principal Place of Business

Mailing Address

**225 WINWARD PASSAGE
CLEARWATER FL 33767****235 WINWARD PASSAGE
CLEARWATER FL 33767-2237
US****822052**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3450304

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MICHAELS, THOMAS O ESQ.
1370 PINEHURST ROAD
DUNEDIN FL 34698**Name
Daniel M. BairStreet Address (P.O. Box Number is Not Acceptable)
235 Windward PassageCity
Clearwater**FL**Zip Code
33767

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)

3/10/00

DATE

9. This corporation is eligible to satisfy its Intangible

- ☐ Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00**After MAY 1, 2000 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
SD	BAIR, THEODORE J	3287 MALLARD DR.	SAFETY HARBOR FL 34695	☐					☐	☐
PD	BAIR, DAVID M	2357 VANDERBUILT DRIVE	CLEARWATER FL 33765	☐					☐	☐
TD	BAIR, DANIEL M	3287 MALLARD DRIVE	SAFETY HARBOR FL 34695	☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐

CR2E034 (9/99)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Daniel M. Bair - Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**3/10/00**
Date**727-443-2514**
Daytime Phone #