

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90446 017 ***150.00

DOCUMENT # P98000031649

1. Entity Name

TIDALWAVE BOAT LIFTS MFG., INC.

Principal Place of Business

Mailing Address

~~#1 TOM RAB LANE~~
~~FT. MYERS FL 33907~~

~~#1 TOM RAB LANE~~
~~FT. MYERS FL 33907~~

1206 B SE 9th Lane

1206 B SE 9th Lane

Cape Coral, FL 33990

Cape Coral, FL 33990

2. Principal Place of Business

1206 SE 9th Lane

3. Mailing Address

1206 SE 9th Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

B

B

City & State

Cape Coral FL

City & State

Cape Coral FL

Zip

Country

33990 LEE

Zip

Country

33990 LEE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARCHONDOULA, EDMONDS N

~~#1 TOM RAB LANE~~

~~FT MYERS FL 33907~~

1206 B SE 9th Lane

Cape Coral, FL 33990

Name

Archondoula N. Edmonds

Street Address (P.O. Box Number is Not Acceptable)

1206 B SE 9th Lane

City

Cape Coral

FL

Zip Code

33990

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

Archondoula N. Edmonds

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

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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 PSTD
NAME EDMONDSA, ARCHONDOULA N
STREET ADDRESS #1 TOM RAB LANE
CITY-ST-ZIP FT. MYERS FL 33907 ☐ Delete

TITLE PSTD
NAME Edmonds, Archondoula N
STREET ADDRESS 1206 B SE 9th Lane
CITY-ST-ZIP Cape Coral, FL 33990 ☒ Change ☐ Addition

TITLE VD
NAME EDMONDSA, DOUGLAS C
STREET ADDRESS #1 TOM RAB LANE
CITY-ST-ZIP FT. MYERS FL 33907 ☐ Delete

TITLE VD
NAME Edmonds, Douglas C.
STREET ADDRESS 1206 B SE 9th Lane
CITY-ST-ZIP Cape Coral, FL 33990 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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

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:

Archondoula N. Edmonds

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/01

Date

(941) 573 9777

Daytime Phone #

CR2E034 (10/00)