2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000000635

2499 NASSAU LANE

FT. LAUDERDALE, FL 33312

Address:

City-St-Zip:

Entity Name: FORT LAUDERDALE MARITIME MUSEUM, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Pi	rincipal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
	TH FEDERAL HWY., STE. 4 ERDALE, FL 33316	2499 NASSAU LANE FT. LAUDERDALE, FL 33312		
Current M	ailing Address:	New Mailing Address:	New Mailing Address:	
1120 SOU ^T FT. LAUDE	TH FEDERAL HWY., STE. 4 ERDALE, FL 33316	2499 NASSAU LANE FT. LAUDERDALE, FL 33312		
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable () Certificate of Status I	Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Ag	Name and Address of New Registered Agent:	
1120 SOU	N, HAMPTON C ESQ TH FEDERAL HWY., STE. 4 ERDALE, FL 33316	LEVIN, NORMAN S ESQ 1120 SOUTH FEDERAL HWY., STE. 2 FT. LAUDERDALE, FL 33316	1120 SOUTH FEDERAL HWY., STE. 2	
	named entity submits this statement for the of Florida.	purpose of changing its registered office or registered a	gent, or both,	
SIGNATUR	RE: NORMAN S. LEVIN	04/29/2002	04/29/2002	
	Electronic Signature of Registered Ag	ent Date		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete COX, ROBERT O 1900 S.E. 15TH ST. FT. LAUDERDALE, FL 33316	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete CRIKELAIR, GEORGE 2500 S.E. 21ST ST. 4 FT. LAUDERDALE, FL 33316	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name:	D () Delete COUNTS, GEORGE	Title: () Change () Addition Name:		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ROBERT O. COX D 04/29/2002