

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


**FILED**  
**Aug 11, 2003 8:00 am**  
**Secretary of State**

08-11-2003 90280 029 \*\*\*550.00

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**DOCUMENT # 501025**

1. Entity Name  
**LAND YACHT HARBOR OF MELBOURNE, INCORPORATED**



Principal Place of Business  
**201 N JOHN RODES BLVD  
MELBOURNE FL 32934-8099  
US**

Mailing Address  
**201 N JOHN RODES BLVD  
MELBOURNE FL 32934-8099  
US**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1827148** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**HEALY, PATRICK F  
HOLLAND & KNIGHT LLP  
1499 SOUTH HARBOR CITY BLVD. STE 201  
MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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	<b>VP KROHN, ROBERT J 201 N. JOHN RODES BLVD. MELBOURNE FL 32934</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P DEANS, WILLIAM RONALD 201 N JOHN RODES BLVD MELBOURNE FL 32934</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S MITCHELL, EDWARD T 201 N JOHN RODES BLVD MELBOURNE FL 32934</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T HANCOCK, JEAN 201 N JOHN RODES BLVD MELBOURNE FL 32934</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D ADKINS, WANDELL F 201 N JOHN RODES BLVD MELBOURNE FL</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RHODES, BOBBY D 201 N JOHN RODES BLVD MELBOURNE FL 32934</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP Hanson, Thomas k. 201 N. John Rodes Blvd. Melbourne, FL 32934</b> <input type="checkbox"/> Change <input checked="" 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D James T. Ryan 201 N. John Rodes Blvd. Melbourne, FL 32934</b> <input type="checkbox"/> Change <input checked="" 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: WILLIAM R. DEANS **WILLIAM R. DEANS** July 16, 2003 321-254-6398

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Attachments  
10110827

11. Officers and Directors Continued

Title: D  delete  
Name: Raymond D. Troyer  
Address: 201 N. John Rodes Blvd.  
Melbourne, FL 32934

Title: D  add  
Name: Jack Davidson  
Address: 202 N. John Rodes Blvd.  
Melbourne, FL 32934