

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 02, 2001 8:00 am**  
**Secretary of State**

02-02-2001 90265 026 \*\*\*150.00

**DOCUMENT # 521515**

1. Entity Name  
**ST. JOHNS BAR PILOTS, INC.**

Principal Place of Business <b>4910 OCEAN STREET  MAYPORT FL 32233</b>	Mailing Address <b>4910 OCEAN STREET  MAYPORT FL 32233</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-1939439</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>THOMAS, JAMES P</b> <b>4910 OCEAN DR</b> <b>MAYPORT FL 32233</b>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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.

SIGNATURE **J. P. THOMAS** **01/29/01**  
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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME D <b>BRYSON, ERIC C</b>	<input type="checkbox"/> Delete	TITLE NAME D <b>BRAUER, WILLIAM M.</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>4910 OCEAN ST</b>		STREET ADDRESS <b>4910 OCEAN STREET</b>	
CITY-ST-ZIP <b>MAYPORT FL</b>		CITY-ST-ZIP <b>MAYPORT, FL.</b>	
TITLE NAME D <b>WINEGEART, JP</b>	<input type="checkbox"/> Delete	TITLE NAME VP <b>J. J. BROWN</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>4910 OCEAN ST</b>		STREET ADDRESS <b>4910 OCEAN STREET</b>	
CITY-ST-ZIP <b>MAYPORT FL</b>		CITY-ST-ZIP <b>MAYPORT, FL.</b>	
TITLE NAME D <b>COLVER, D. R</b>	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>4910 OCEAN ST</b>		STREET ADDRESS	
CITY-ST-ZIP <b>MAYPORT FL</b>		CITY-ST-ZIP	
TITLE NAME PS <b>THOMAS, JAMES P</b>	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>4910 IOCEAN ST</b>		STREET ADDRESS	
CITY-ST-ZIP <b>MAYPORT FL</b>		CITY-ST-ZIP	
TITLE NAME VP <b>BRAUER, WILLIAM M</b>	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>4910 OCEAN ST</b>		STREET ADDRESS	
CITY-ST-ZIP <b>MAYPORT FL 32233</b>		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: **J. P. THOMAS** **01/29/01** **904/249-5631**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE034 (10/00)