2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 538000

LOWE IV, DAVID H,

PALM CITY, FL

1892 SW OAKWATER POINT

Name:

Address: City-St-Zip:

Entity Name: DAVID LOWE'S BOATYARD, INC.

FILED Feb 05, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4550 S E BOATYARD DRIVE P.O. BOX L PORT SALERNO, FL 34992 **New Mailing Address: Current Mailing Address:** 4550 S E BOATYARD DRIVE P.O. BOX L PORT SALERNO, FL 34992 FEI Number: 59-1747179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOWE IV, DAVID H 1892 SW OAKWATER PT PALM CITY, FL 34990 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LOWE III, DAVID H. Name: Name: 5645 SE HARBOR TERRACE Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: STD Title: () Delete () Change () Addition Name: LOWE, BETTY W. Name: 5645 SE HARBOR TERRACE Address: Address: STUART, FL 34997 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

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

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID H LOWE IV VP 02/05/2002