

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
 04-17-2001 90087 032 ***150.00

0059741

DOCUMENT # 539668

1. Entity Name

ROGERS OUTBOARD SALES & SERVICE, INC.

Principal Place of Business

**1103 GARDEN ST.
 TITUSVILLE FL 32796**

Mailing Address

**1103 GARDEN ST.
 TITUSVILLE FL 32796**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1874798**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**HUDSON, RAY
 2701 PINE RIDGE DRIVE
 TITUSVILLE FL 32780**

7. Name and Address of New Registered Agent

Name

MARK MONTGOMERY

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

1130 OVERLOOK TR.

City

Titusville

FL

Zip Code

32780

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/01

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

TITLE **P** ☒ Delete
 NAME **HUDSON, RAY**
 STREET ADDRESS **2701 PINE RIDGE DR.**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE **V** ☐ Delete
 NAME **MONTGOMERY, MARK**
 STREET ADDRESS **1130 OVERLOOK TERRACE**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE **ST** ☒ Delete
 NAME **HUDSON, NORMA**
 STREET ADDRESS **2701 PINERIDGE DRIVE**
 CITY-ST-ZIP **TITUSVILLE FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Change ☒ Addition
 NAME **CRYSTAL MONTGOMERY**
 STREET ADDRESS **1130 OVERLOOK TR**
 CITY-ST-ZIP **Titusville FL 32780**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/01 (321) 267-6844
 Date Daytime Phone #

CR2E034 (10/00)