

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90106 039 ***150.00

DOCUMENT # 544475 ✓

1. Entity Name

EVERGLADES MARINA INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1801 SE 17th St.

3. Mailing Address

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

Zip

33316

Country

BROWARD

Country

4. FEI Number

59-1785743

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Judy Lindsey

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

2621 Arthur St.

City

FT. LAUDERDALE

FL

Zip Code

33020

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

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 PRESIDENT
NAME LOUISE STAHLY
STREET ADDRESS 2500 E. LAS OLAS BLVD
CITY-ST-ZIP FT. LAUDERDALE, FL 33001

TITLE VICE PRESIDENT
NAME TERRY STAHLY
STREET ADDRESS 62 Country Club Pl.
CITY-ST-ZIP BLOOMINGTON, IL 61701

TITLE SECRETARY
NAME VICKI STAHLY BAUER
STREET ADDRESS 10415 WADSWORTH BLVD.
CITY-ST-ZIP BROOMFIELD, CO 80021

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IN THIS SPACE**

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

everglades

Marina

ATTACH #544475/645261

DRY STORAGE • FUEL • MARINE STORE

April 22, 2002

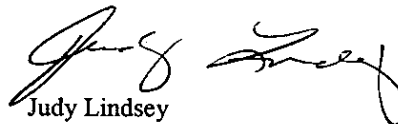
Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314

To Whom It May Concern:

Enclosed is our Annual Report for a Corporation. We did not receive the original report. Last year our document number was 544475.

Very truly yours,

EVERGLADES MARINA INC.


Judy Lindsey

Enclosure