

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90198 044 ***150.00

0126596 AV

DOCUMENT # 603960

1. Entity Name

GOULD, COOKSEY, FENNELL, O'NEILL, MARINE, CARTER & HAFNER, P.A.

Principal Place of Business

**979 BEACHLAND BLVD
 VERO BEACH FL 32963-1688**

Mailing Address

**979 BEACHLAND BLVD
 VERO BEACH FL 32963-1688**

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 59-1426911

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MARINE, CHRISTOPHER H.
 1435 50TH COURT
 VERO BEACH FL 32966**

7. Name and Address of New Registered Agent

Name
Christopher H. Marine

Street Address (P.O. Box Number is Not Acceptable)
1545 Shorelands Drive East

City **Vero Beach** **FL** Zip Code **32963**

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]

Christopher H. Marine

2/5/02

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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC COOKSEY, BYRON T 2102 VICTORY BLVD VERO BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTC FENNELL, DARRELL 4950 10TH ST VERO BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MARINE, CHRISTOPHER H. 1435 50TH COURT VERO BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV O'NEILL, EUGENE J 308 INDIAN LILAC RD VERO BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HAFNER, TROY B 345 21ST AVE VERO BEACH FL 32962	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FENNELL, TODD W 1706 36 AVE VERO BCH FL	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV David M. Carter 1575 Gracewood Lane Vero Beach, FL 32963	<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	DV Christopher H. Marine 1545 Shorelands Drive East Vero Beach, FL 32963	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Eugene J. O'Neill 1541 Smugglers Cove Vero Beach, IL 32963	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Troy B. Hafner 517 East Causeway Blvd. Vero Beach, FL 32963	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Todd W. Fennell 1435 Shorelands Drive West Vero Beach, FL 32963	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Darrell Fennell, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **2/5/02**

Phone **(561) 231-1100**

CR2E034 (9/01)