

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90003 019 ***150.00

DOCUMENT # 635732

1. Entity Name

TWIN HARBORS, INC.

Principal Place of Business

**910 S.E. 17TH ST. SUITE 300
FORT LAUDERDALE FL 33316**

Mailing Address

**910 S.E. 17TH ST. SUITE 300
FORT LAUDERDALE FL 33316**

2. Principal Place of Business

3. Mailing Address

C/o Atlantia Holdings
645 E. Dania Beach Blvd.
Dania Beach, FL 33004

C/o Atlantia Holdings
645 E. Dania Beach Blvd.
Dania Beach, FL 33004

DO NOT WRITE IN THIS SPACE

FEI Number

59-1938411

Applied For

Not Applicable

Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BLACKBURN, ACE J JR
COONEY, MATTSO, LANCE, BLACKBURN RICHARDS
2312 WILTON DR.
FORT LAUDERDALE FL 33305**

Name

Street Address

City

**John Watson, Esq.
Cooney Mattson et al
2312 Wilton Drive
Fort Lauderdale, FL 33305**

Code

7. Name and Address of New Registered Agent

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) ☐

**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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BAILEY, WILLIAM A**
STREET ADDRESS **910 S.E. 17TH ST, SUITE 300**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE **S** ☐ Delete
NAME **FARRELL, JAMES B**
STREET ADDRESS **910 S.E. 17TH ST, SUITE 300**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12.

P/D
TITLE **A. Blackburn, Jr.**
NAME **C/o Atlantia Holdings**
STREET ADDRESS **645 E. Dania Beach Blvd.**
CITY-ST-ZIP **Dania Beach, FL 33004**

S/D
TITLE **C. Economou**
NAME **C/o Atlantia Holdings**
STREET ADDRESS **645 E. Dania Beach Blvd.**
CITY-ST-ZIP **Dania Beach, FL 33004**

D
TITLE **J. Wagner**
NAME **C/o Atlantia Holdings**
STREET ADDRESS **645 E. Dania Beach Blvd.**
CITY-ST-ZIP **Dania Beach, FL 33004**

D
TITLE **G. Morfidis**
NAME **C/o Atlantia Holdings**
STREET ADDRESS **645 E. Dania Beach Blvd.**
CITY-ST-ZIP **Dania Beach, FL 33004**

D
TITLE **P. Bartos**
NAME **C/o Atlantia Holdings**
STREET ADDRESS **663 E. Dania Beach Blvd.**
CITY-ST-ZIP **Dania Beach, FL 33004**

13. DIRECTORS IN 11

Change ☒ Addition

Change ☒ Addition

Change ☒ Addition

Change ☒ Addition

Change ☒ Addition

Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #