

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90020 033 ****61.25

005-4597

DOCUMENT # 722207

1. Entity Name

EDUCATIONAL BOATING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7536 WENTWORTH DR.
 LAKE WORTH FL 33467
 US

7536 WENTWORTH
 FT. WORTH FL 33467
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7212707

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WAYNE A. SUCKOW
7536 WENTWORTH DR.
LAKE WORTH FL 33467

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

January 8, 2001
 DATE

CK0105

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	SUCKOW, WAYNE A.	
STREET ADDRESS	7536 WENTWORTH	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PECORONI, CHARLES	
STREET ADDRESS	1004 10TH LANE	
CITY-ST-ZIP	LAKE WORTH FL 33463	
TITLE	S	<input type="checkbox"/> Delete
NAME	LEVINE, JACQUELIN	
STREET ADDRESS	206 SW 13TH AVE	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	
TITLE	T	<input type="checkbox"/> Delete
NAME	DORIS F. BOYLE	
STREET ADDRESS	6839 TRADEWIND WAY	
CITY-ST-ZIP	LANTANA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ASHLEY, JAMES	
STREET ADDRESS	744 2ME 12TH TERR	
CITY-ST-ZIP	BOYNTON BCH. FL 33435	
TITLE	D	<input type="checkbox"/> Delete
NAME	LIVINGSTON, DONALD	
STREET ADDRESS	1224 EAGLES LANDING WY	
CITY-ST-ZIP	LAKE WORTH FL 33467	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUCKOW, MARY R.	
STREET ADDRESS	7536 WENTWORTH DR	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne A. Suckow
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 8, 2001 561-968-9546
 Date Daytime Phone #

CR2E037 (10/00)