

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726326

1. Entity Name

AIR BOAT ASSOCIATION OF FLORIDA

Principal Place of Business

Mailing Address

25400 SW 8ST
MIAMI FL 33157

10010 SW 161 STREET
PERRINE FL 33157
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

59-2849731

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POTTER, RICHARD M
10010 SW 161 ST
PERRINE FL 33157

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
POTTER, RICHARD
10010 SW 161 ST
PERRINE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
DANNAY, JAY
10901 SW 116 STREET
MIAMI FL 33176

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
BALMAN, DAVE
3845 SW 103 AVE
MIAMI FL 33165

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
BUFKIN, BUTCH
3210 SW 106 AVE
MIAMI FL 33165

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

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:

Richard M. Potter

3/18/02

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

03-28-2002 90167 015 ****61.25



DO NOT WRITE IN THIS SPACE

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