## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # **F13240** May 16, 2000 8:00 am Secretary of State MARCO MARINE CONSTRUCTION, INC. 05-16-2000 90166 037 \*\*\*150.00 Principal Place of Business Mailing Address 601 E. ELKCAM CIR., #C4 601 E. ELKCAM CIR., #C4 P.O. BOX 1247 P.O. BOX 1247 MARCO ISLAND FL 34145 MARCO ISLAND FL 34146-1247 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2049338 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TOBIE, RUTH Street Address (P.O. Box Number is Not Acceptable) 1273 BLUEBIRD AVE MARCO ISLAND FL 34145 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DP P Addition X Delete TITLE ☐ Change RICCI, DONALD P NAME Donald P. Ricci Jr. STREET ADDRESS 3049 SILVER LAKE BLVD STREET ADDRESS 110 Lely Ct. CITY-ST-ZIP NAPLES FL 34114 CITY-ST-ZIP Naples, FL 34114 ☐ Change Addition Delete TITLE TITLE NAME RICCI, E SHARON NAME Patricia A. Price STREET ADDRESS STREET ADDRESS 475 PALO VERDE DRIVE 1349 Freeport Ave. CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34119 Marco Island, FL 34145 ☐ Delete ☐ Change **√** Addition TITLE TITLE NAME Ruth M. Tobie NAME STREET ADDRESS STREET ADDRESS 1273 Bluebird Ave. CITY-ST-ZIP CITY-ST-ZIP Marco Island, FL 34145 ☐ Delete TITLE ☐ Change Addition TITLE E. Sharon Hedley NAME NAME STREET ADDRESS STREET ADDRESS 475 Palo Verde Drive CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34119-☐ Change Addition ☐ Delete TITLE NAME NAME Barton S. Mitchell STREET ADDRESS STREET ADDRESS 1071 E. Inlet Draw Lot CITY-ST-ZIP CITY-ST-7IP Marco Island, FL 34145 Change TITLE ☐ Delete TITLE Addition NAME NAME ٠٠٠ في زوج $C_{ij} = \mathcal{K}_{ij}$ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.