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

SIGNATURE

## DOCUMENT # F9300001224 Aug 28, 2000 8:00 am Secretary of State 1. Entity Name LEWMAR MARINE, INC. 08-28-2000 90033 034 \*\*\*550.00 Mailing Address Principal Place of Business 351 NEW WHITFIELD ST. 351 NEW WHITFIELD ST. GUILFORD CT 06437 GUILFORD CT 06437-3400 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 06-0918087 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required-7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1202 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301 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. AS COMMEND MENTED BY 速即压缩的。 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 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 12. 11, ASST, SECLETARY Change ☐ Addition CR2E034 (9/99) □ Delete TITLE RANDOLPH BLANTON NAME NAME BLANTON, RANDOLPH 351 NEW WHITEIEM ST. STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST GUILFORD, CT 06437 CITY-ST-ZIP CITY-ST-ZIP GUILFORD CT 06437 TREASURED AND SECRETARLY - Change Addition Delete TITLE TITLE CHAZMEY NAME NAME FLETCHER, ALAN 351 NEW WHITE/EUD ST. STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST GUILFORD, CT 06437 CITY-ST-ZIP CITY-ST-ZIP **GULFFORD CT** prues went **⊠** Delete 🗶 Addition Change TITLE TITLE ARTHUR MACMICLAN NAME NAME Hartley, Simon 351 NEW WHITFIELD ST. STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST GUILFORD. CT 06437 CITY-ST-ZIP CITY-ST-ZIP GULFFORD CT ASST. SECRETARY **▼** Delete ☐ Change Addition TITLE TITLE STEVEN PALEY NAME NAME FISHER, IAN 6475 PARKIMAND DRIVE STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST SALASOTA, FL 34243 ASST. THEASUNER CITY-ST-ZIP CITY-ST-ZIP **GULFFORD CT** Addition ☐ Change Delete TITLE DERBIE ZIMMERNAM NAME NAME HOLT, HELEN 351 NEW WHITFIELD ST. STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST 06437 CITY-ST-ZIP GUILFORD, CT CITY-ST-ZIP **GULFFORD CT** Change ☐ Addition ■ Delete TITLE TITLE NAME HARTLEY, SIMON NAME STREET ADDRESS STREET ADDRESS 351 NEW WHITFIELD ST CITY-ST-ZIP GULFFORD CT 13. I hereby certify that the information supplied with this filling 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.

immormai

Daytime Phone #