

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000005760

1. Entity Name

WELLCRAFT MARINE CORP.

FILED

May 18, 2000 8:00 am
Secretary of State

05-18-2000 90281 046 ***150.00

Principal Place of Business

100 SOUTH 5TH ST., STE. 2400
MINNEAPOLIS MN 55402

Mailing Address

100 SOUTH 5TH ST., STE. 2400
MINNEAPOLIS MN 55402-1206

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

36-3924056

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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

4321 WILSON ST VAC
CYNTHIA J. BROWN

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVP	<input type="checkbox"/> Delete
NAME	CLOUTIER, ROGER R II	
STREET ADDRESS	100 SOUTH FIFTH STREET, STE. 2500	
CITY-ST-ZIP	MINNEAPOLIS MN	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	ROSENDAHL, JOHN S	
STREET ADDRESS	100 SOUTH FIFTH ST., STE. 2400	
CITY-ST-ZIP	MINNEAPOLIS MN	
TITLE	D	<input type="checkbox"/> Delete
NAME	OPPEGAARD, GRANT	
STREET ADDRESS	100 SOUTH FIFTH STREET #2400	
CITY-ST-ZIP	MINNEAPOLIS MN	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	MCCONNELL, MARY P	
STREET ADDRESS	100 SOUTH FIFTH ST., STE. 2400	
CITY-ST-ZIP	MINNEAPOLIS MN	
TITLE	P	<input type="checkbox"/> Delete
NAME	SCRUGGS, MICHAEL	
STREET ADDRESS	1651 WHITFIELD AVE.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CALLAHAN, STEVE A	
STREET ADDRESS	1651 WHITFIELD AVE	
CITY-ST-ZIP	SARASOTA FL	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Greg Gallagher	
STREET ADDRESS	1651 Whitfield Ave.	
CITY-ST-ZIP	Sarasota, FL	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bill Vanik	
STREET ADDRESS	1651 Whitfield Ave	
CITY-ST-ZIP	Sarasota, FL	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert Mataya	
STREET ADDRESS	1651 Whitfield Ave	
CITY-ST-ZIP	Sarasota, FL	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark W. Peters	
STREET ADDRESS	100 South Fifth Street, Suite 2400	
CITY-ST-ZIP	Minneapolis, MN	
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		

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 #

4/25/00

612-339-7600

CR2E034 (9/99)