

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90114 039 ***150.00

DOCUMENT # F95000005352

1. Entity Name
KAHUNA KATAMARANS, LTD. CO.

Principal Place of Business

**451 BALD EAGLE DR
 MARCO ISLAND FL 34145**

Mailing Address

**821-A PALM STREET
 MARCO ISLAND FL 34145-2007**

2. Principal Place of Business

951 BALD EAGLE DR.
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

MARCO ISLAND, FL

City & State

Zip

Country

34145

Country

4. FEI Number

01-0501354

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**DAVIS, BLAINE E II
 821 PALM STREET., #A
 MARCO ISLAND FL 34145**

7. Name and Address of New Registered Agent

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

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, 2002 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

TITLE **P** ☐ Delete
 NAME **DAVIS, BLAINE E II**
 STREET ADDRESS **821 PALM ST., #A**
 CITY-ST-ZIP **MARCO ISLAND FL 34145**

TITLE **C** ☐ Delete
 NAME **GARCIER, PETER ESQ**
 STREET ADDRESS **SKELTON, TANTAR, ABBOTT MAIN STREET**
 CITY-ST-ZIP **AUBURN ME 04210**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

BLAINE E. DAVIS, II
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02
 Date

941-642-7704
 Daytime Phone #

CR2E034 (9/01)