## 2000 UNIFORM BUSINESS REPORT (UBR)

## May 03, 2000 8:00 am Secretary of State DOCUMENT # **F96000004286** 1. Entity Name LONGBOAT INVESTMENTS, LTD., INC. OF JERSEY, C.I. 05-03-2000 90019 050 \*\*\*150.00 Principal Place of Business ....... Mailing Address 26 ROUNDWOOD PARK 26 ROUNDWOOD PARK HARPENDEN HERTS ALS 3AF ENGL HARPENDEN HERTS ALS 3AF ENGL 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0249301 Not Applicable Country **\$8.75** Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GLENDINNING, RENEARM Street Address (P.O. Box Number is Not Acceptable) 1858 RINGLING BLVD SARASOTA FL 34236 Zip Code City 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 Atter 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS\* 11. Delete TITLE ☐ Addition TITLE MARSHALL, JOHN NAME NAME PO BOX 796, CHARLES HOUSE, CHARLES ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD ☐ Addition ☐ Change . Delete TITLE TITLE DENNISON, MARSHALL NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 796, CHARLES HOUSE, CHARLES ST CITY-ST-ZIP CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD Delete TITLE Change ☐ Addition TITLE POWER, MICHAEL D NAME NAME STREET ADDRESS PO BOX 796, CHARLES HOUSE, CHARLES ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD Delete Change ☐ Addition TITLE TITLE KNEE, MICHAEL W NAME NAME STREET ADDRESS 26 ROUNDWOOD PARK STREFT ADDRESS CITY-ST-ZIP CITY-ST-ZIP HARPENDEN HERTS ALS 3AF ENGL Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED