

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # G14175**1. Entity Name  
**COTBY, INC.****FILED**  
**Jan 18, 2001 8:00 am**  
**Secretary of State**

01-18-2001 90002 041 \*\*\*150.00

Principal Place of Business: **1824 JACK POINT LN  
BOCA GRANDE, FL 33921  
US**  
Mailing Address: **PO BOX 926  
BOCA GRANDE, FL 33921-0926  
US**2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country  
3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2226456** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**6. Name and Address of Current Registered Agent  
**MAGRATTEN, GREGORY  
PARK AVE BOX 926  
BOCA GRANDE, FL FL 33921**  
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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP  
P MAGRATTEN, GREG J P.O. BOX 926 BOCA GRANDE FL  
S BROOKS, MAGRATTEN PO BOX 926 BOCA GRANDE FL  
VP MAGRATTEN, DOROTHY P.O. 926 BOCA GRANDE FL 33921  
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
Change Addition  
Change Addition  
Change Addition  
Change Addition  
Change Addition  
Change Addition

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: *Greg J. Magratten* (**GREG J. MAGRATTEN**)Date: 1/04/01 941-964-0206  
Daytime Phone #