

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90693 032 ***150.00

DOCUMENT # **H26512**

1. Entity Name
BUTLER MARINE TECHNOLOGY, INC.



Principal Place of Business
**600 S.E. 5TH COURT
POMPANO BEACH FL 33060**

Mailing Address
**600 S.E. 5TH COURT
POMPANO BEACH FL 33060**

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 **59-2469232**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BUTLER, DAVID F.
600 S.E. 5TH COURT
POMPANO BEACH FL 33060**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **BUTLER, DAVID F.**
STREET ADDRESS **600 S.E. 5TH COURT**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **SD** ☐ Delete
NAME **BUTLER, WANDA S.**
STREET ADDRESS **600 S.E. 5TH COURT**
CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **D** ☐ Delete
NAME **BUTLER, DONALD W.**
STREET ADDRESS **450 WATER STREET**
CITY-ST-ZIP **GUILFORD CT**

TITLE **D** ☐ Delete
NAME **BUTLER, DAVID E.**
STREET ADDRESS **127 WRIGHT RD**
CITY-ST-ZIP **CONCORD MA**

TITLE **D** ☐ Delete
NAME **SCHANK, ERIC S**
STREET ADDRESS **4180 PROVIDENCE SQ**
CITY-ST-ZIP **ALPHARETTA GA**

TITLE **D** ☐ Delete
NAME **LAUGHTER, HEATHER**
STREET ADDRESS **9885 N DEEP CREEK DRIVE**
CITY-ST-ZIP **CEDAR HILLS UT 84062**

11. 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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, such as other like empowered.

SIGNATURE:

David F. Butler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 6, 2003 *954 781 7458*

CR2E034 (10/02)