## 2003 FOR PROFIT CORPORATION

## FILED Apr 14, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** H74616 **DOCUMENT #** 1. Entity Name 04-14-2003 90023 001 \*\*\*150.00 JON JOHNSON MARINE ELECTRONICS. INC. Mailing Address Principal Place of Business 11522 OVERSEAS HWY 11522 OVERSEAS HWY MARATHON FL 33050 MARATHON FL 33050 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-2592663 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent JOHNSON, JON P Street Address (P.O. Box Number is Not Acceptable) 212 A 120TH ST. GULF MARATHON FL 33050 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. I am familiar with, and accept in the obligations of registered agent. SIGNATURE DATE 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. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition **VDS** ☐ Change TITLE ☐ Delete TITLE JOHNSON, JON P. NAME NAME 212A 120TH ST GULF STREET ADDRESS STREET ADDRESS MARATHON FL CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY::ST-ZIP Change ☐ Addition TITLE Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME

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

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