2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2002 8:00 AM
Secretary of State

DOCUMENT# J39447

Entity Name: NAUTILUS DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

1899 SW CRANE CREEK AVE.
P.O. BOX 485
PALM CITY, FL 34990 US

New Principal Place of Business:

1899 SW CRANE CREEK AVE.
PALM CITY, FL 34990 US

Current Mailing Address:

P. O. BOX 485
PALM CITY, FL 34991 US

New Mailing Address:

FEI Number: 59-2732659 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COON, DONALD, M
1899 SW CRANE CREEK AVE.
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: COON, DONALD M.,
Address: 1899 SW CRANE CREEK AVE.
City-St-Zip: PALM CITY, FL

Title: DST ( ) Delete
Name: COON, ANNA MARIE,
Address: 1899 SW CRANE CREEK AVE.
City-St-Zip: PALM CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: COON, DONALD M.,
Address: 1899 SW CRANE CREEK AVE.
City-St-Zip: PALM CITY, FL 34990

Title: DST (X) Change ( ) Addition
Name: COON, ANNA MARIE,
Address: 1899 SW CRANE CREEK AVE.
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNA MARIE COON DST 04/25/2002

Electronic Signature of Signing Officer or Director Date