

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90039 013 ****50.00

DOCUMENT # L02000026684

1. Entity Name

DIAMOND 99 SAILING SCHOOL, LLC



Principal Place of Business

**4399 NORTH U.S. HIGHWAY 1
MELBOURNE FL 32935**

Mailing Address

**4399 NORTH U.S. HIGHWAY 1
MELBOURNE FL 32935**

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

71-0910982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DETTMER, DALE A
304 SOUTH HARBOR CITY BLVD., SUITE 201
MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name **JOHN W FINALATOR, JR**

Street Address (P.O. Box Number is Not Acceptable)

2625 LARRY CT

City **MELBOURNE**

FL

Zip Code **32935**

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 **JOHN W FINALATOR, JR**

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

John W Finalator, Jr

(NOTE: Registered Agent signature required when reinstating)

April 3, 2003

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS / MANAGERS

TITLE **MG RM**
NAME **DIAMOND 99 MARINA & YACHT SALES, INC.**
STREET ADDRESS **4399 N. U.S. Hwy 1**
CITY-ST-ZIP **MELBOURNE, FL 32935**

☐ Delete

TITLE **MG RM**
NAME **COYOTE SAILING ENTERPRISES, LLP**
STREET ADDRESS **2625 LARRY CT**
CITY-ST-ZIP **MELBOURNE, FL 32935**

☐ Delete

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10. ADDITIONS / CHANGES

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

JOHN W FINALATOR, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

April 3, 2003

Daytime Phone #

321-254-1490
15K2

CR2E083 (10/02)