

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90113 026 ***150.00

DOCUMENT # L65020

1. Entity Name

BILL'S BOATING SERVICES, INC.



Principal Place of Business

2660 NW 1ST AVE

WAREHOUSE 5

BOCA RATON FL 33431

US

Mailing Address

4800 NW 5TH LANE

BOCA RATON FL 33431

US

2. Principal Place of Business

3. Mailing Address

P.O. Box 808

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Boca Raton, FL

Zip

Country

Zip

Country

33429

Palm Beach

4. FEI Number

59-2144498

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, WILLIAM N.

4800 NW 5TH LANE

BOCA RATON FL 33431

Name **Johnson, William N.**

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

3939 NE 5th Ave B-208

City **Boca Raton**

FL

Zip Code
33431

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

William N Johnson P
(NOTE: Registered Agent signature required when reinstating)

3/7/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
NAME **JOHNSON, WILLIAM N**
STREET ADDRESS **4800 NW 5TH LANE**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **P** ☒ Change ☐ Addition
NAME **Johnson William N**
STREET ADDRESS **3939 NE 5th Ave B-208**
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **VS** ☒ Delete
NAME **JOHNSON, AUDREY**
STREET ADDRESS **4800 NW 5TH LANE**
CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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, with all other like empowered.

SIGNATURE:

William N Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William N Johnson P 3/7/03 (561)
706-7689

Date

Daytime Phone #

CR2E034 (10/02)