

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

004189

DOCUMENT # N00000007150

1. Entity Name

CHARTER YACHT BROKERS ASSOCIATION, INC.



FILED

03 APR 25 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business

61 WOODLAND DR
TEQUESTA FL 33469

Mailing Address

61 WOODLAND DR
TEQUESTA FL 33469

2. Principal Place of Business

497 Yacht Harbor Drive

3. Mailing Address

497 Yacht Harbor Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Osprey, FL 34229-9152

City & State

Osprey, FL 34229-9152

4. FEI Number 65-1050976

Applied For

Not Applicable

Zip

34229-9152

Country

USA

Zip

34229-9152

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAMBERLAIN, PAUL
61 WOODLAND DRIVE
TEQUESTA FL 33469

7. Name and Address of New Registered Agent

Name

Spiegel & Utrera, P.A.

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

1840 Coral Way, 4th Floor

City

Miami, FL

FL

Zip Code

33145

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. **Spiegel & Utrera, P.A.**

SIGNATURE

By:

Signature, typed or printed name of registered agent (Signature required when reinstating)

Natalia Utrera Vice President

DATE

4/24/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May be
Added to Fees

100018470511

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **STEWART, ELAINE**
STREET ADDRESS **3883 ANDREWS CROSSING**
CITY-ST-ZIP **ROSWELL GA 30075**

TITLE **TD** ☒ Delete
NAME **OWEN, LINDA**
STREET ADDRESS **5245 MERCIER**
CITY-ST-ZIP **KANSAS CITY MO 64112**

TITLE **SD** ☒ Delete
NAME **HINCKLEY, TINA**
STREET ADDRESS **PO BOX 6**
CITY-ST-ZIP **SOUTHWEST HARBOR ME 04679**

TITLE **PD** ☐ Delete
NAME **ASHLEY, JUDY**
STREET ADDRESS **1104 GRANT STREET**
CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **VD** ☒ Delete
NAME **CHAMBERLAIN, PAUL**
STREET ADDRESS **61 WOODLAND DRIVE**
CITY-ST-ZIP **TEQUESTA FL 33469**

TITLE **D** ☒ Delete
NAME **JACHNEY, LYNN**
STREET ADDRESS **PO BOX 302**
CITY-ST-ZIP **MARBLEHEAD MA 01945**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P/D** ☐ Change ☒ Addition
NAME **Trayford, Charles III**
STREET ADDRESS **11 Orchard Hill Road**
CITY-ST-ZIP **Newtown, CT 06470-2225**

TITLE **VP/D** ☐ Change ☒ Addition
NAME **Stewart, Ellen**
STREET ADDRESS **6501 Red Hook Plaza, #201**
CITY-ST-ZIP **St. Thomas, USVI 00802**

TITLE **T/D** ☐ Change ☒ Addition
NAME **Kent, Carol**
STREET ADDRESS **77 North Washington Street, Suite 200**
CITY-ST-ZIP **Boston, MA 02114-1993**

TITLE **D** ☒ Change ☐ Addition
NAME **Ashley, Judy**
STREET ADDRESS **1104 Grand Street**
CITY-ST-ZIP **Key Largo, FL 33037**

TITLE **S/D** ☐ Change ☒ Addition
NAME **Dailey, Louise S.**
STREET ADDRESS **497 Yacht Harbor Drive, Osprey, FL 34229**

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 617, 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:

Charles Trayford III, President 4/21/03 (203) 270-9992

CR2E037 (10/02)