

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

FILED
Feb 06, 2003 8:00 am
Secretary of State

01-09-2003 90052 032 ****70.00

DOCUMENT # **N02000007831**

1. Entity Name
**WILLIAM T. KOCH INTERNATIONAL SEA SCOUT CUP ASSO
CIATION, INC.**



Principal Place of Business
**318 INDIAN TRACE #511
WESTON FL 33326**

Mailing Address
**318 INDIAN TRACE #511
WESTON FL 33326**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

03-0487433

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELROY, RICHARD J
318 INDIAN TRACE #511
WESTON FL 33326**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when re-registering)

1/2/03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

~~TITLE~~
~~NAME~~
~~STREET ADDRESS~~
~~CITY-ST-ZIP~~
~~RICHARD J. ELROY~~ Delete

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **PRESIDENT**
STREET ADDRESS **RICHARD J. ELROY**
CITY-ST-ZIP **318 INDIAN TRACE WESTON FL 33326**

TITLE Change Addition
NAME **VICE PRESIDENT**
STREET ADDRESS **JEFF MURRAY**
CITY-ST-ZIP **318 INDIAN TRACE #511 WESTON FL 33326**

TITLE Change Addition
NAME **BRAD GOLDSTEIN**
STREET ADDRESS **VICE PRESIDENT**
CITY-ST-ZIP **318 INDIAN TRACE #511 WESTON, FL 33326**

TITLE Change Addition
NAME **OR**
STREET ADDRESS **1601 FORUM PL #P-2**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/03

DATE

305-798-8130

DAYTIME PHONE #

CR2E037 (10/02)