## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N03173

FILED May 04, 2003 Secretary of State

Entity Name: HOLIDAY ISLES MARINE TRAINING & RESCUE GROUP, INC.

Current Pi	rincipal Place o	of Business:	New Principal Place of	New Principal Place of Business:		
	CIEGA DR BCH, FL 33708	US	299 BOCA CIEGA DR MADEIRA BCH, FL 337	08 US		
Current M	ailing Address	:	New Mailing Address:	New Mailing Address:		
	CIEGA DR BCH, FL 33708	US	299 BOCA CIEGA DR MADEIRA BCH, FL 337	08 US		
El Number:	59-2834825	FEI Number Applied For ( ) F	El Number Not Applicable()	Certificate of Status Desired ( )		
Name and	Address of Cu	rrent Registered Agent:	Name and Address of I	New Registered Agent:		
	R, DAVID W RIMOOR BLVD L 33777 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, n the State of Florida.						
SIGNATUF						
	Electronic	Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Fitle: Name: Address: Dity-St-Zip:	PD () E GARDNER, DAVI 8477 MERRIMOO LARGO, FL 3377	OR BLVD	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition		
Title: Name: Address: Dity-St-Zip:	TOWNSEND, WII 220 176TH TERR		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition		
Fitle: Name: Address: Dity-St-Zip:	TD () E LEBER, ELIZABE 5415 51 ST TERF SAINT PETERSB	RN	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition		
Title: Name: Address: Dity-St-Zip:	SD () E GARDNER, NANC 8477 MERRIMOO LARGO, FL 3377	DR BLVD	Title: ( Name: Address: City-St-Zip:	) Change ()Addition		
Fitle: Name: Address: Dity-St-Zip:	D ()E ATTELD, TERREI 10221 SAILWIND LARGO, FL 3377	S BLVD APT 10	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition		
Fitle: Name: Address: Dity-St-Zip:	D () E BROWN, MICHAE 15843 REDINGTO REDINGTON BEA	ON DR	Title: ( Name: Address: City-St-Zip:	) Change ()Addition		
				vemption stated in Section 110.07/2\/		

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE:	DAVID W GARDNER	PD	05/04/2003
	Flacturals Constant of Constant Officer of Discrete		Б.