

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 20, 2001 8:00 am
Secretary of State

06-20-2001 90014 019 ****70.00

06/20/01

DOCUMENT # N34142

1. Entity Name

CHRISTIAN OVERSEAS SHIPPING, INCORPORATED



Principal Place of Business

652 MOUNTAIN WAY AVE.
 DELTONA FL 32738
 US

Mailing Address

P.O. BOX 523
 OSTEEN FL 32764
 US

C0071831



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

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

VILLAUME, DAVID A
 652 MOUNTAIN WAY AVE.
 DELTONA FL 32738

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution.

~~\$500~~ May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D Delete
 NAME: VILLAUME, DAVID A
 STREET ADDRESS: 652 MOUNTAIN WAY AVE.
 CITY-ST-ZIP: DELTONA FL 32738

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

TITLE: D Delete
 NAME: VILLAUME, MARK L
 STREET ADDRESS: 733 MORRILL ST.
 CITY-ST-ZIP: GILFORD NH

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

TITLE: D Delete
 NAME: AUGER, CHRISTOPHER T
 STREET ADDRESS: 652 MOUNTAIN WAY AVE.
 CITY-ST-ZIP: DELTONA FL 32738

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

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

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

TITLE: Delete
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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 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: *David A. Villaume* (Typed: DAVID A. VILLAUME) *DAVID A. VILLAUME* (Typed: DAVID A. VILLAUME) *904-532-2874* *01/11/01*

CR2E037 (10/00)