## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N44886

Entity Name: FLOTILLA TWO, INC.

FILED Jul 18, 2002 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 601 SEABREEZE BLVD FT LAUDERDALE, FL 33316 **Current Mailing Address: New Mailing Address:** 601 SEABREEZE BLVD FT LAUDERDALE, FL 33316 FEI Number: 65-0097933 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLAZZARD, NORSE N 4401 WEST TRADEWINDS AVENUE SUITE 207 FORT LAUDERDALE, FL 33308 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CARSTEN, HOWARD C. Name: Name: 601 SEABREEZE BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33316 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: TAYLOR, COLIN Name: Address: 601 SEABREEZE BLVD. Address: City-St-Zip: FT LAUDERDALE, FL 33316 City-St-Zip: Title: () Delete Title: () Change () Addition BLAZZARD, NORSE N Name: Name: 601 SEABREEZE BLVD. Address: Address: City-St-Zip: FT LAUDERDALE, FL 33316 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: RUNGO, JOHN Name: 601 SEABREEZE BLVD. Address: Address: City-St-Zip: FT LAUDERDALE, FL 33316 City-St-Zip: Title: () Delete Title: () Change () Addition SMART, CECIL Name: Name: 601 SEABREEZE BLVD. Address: Address: FT. LAUDERDALE, FL 33316 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition EVANS, WARREN J Name: Name: Address: 601 SEABREEZE BLVD. Address: FT LAUDERDALE, FL 33316 City-St-Zip: City-St-Zip:

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: NORSE N. BLAZZARD SD 07/18/2002

ROBERT BEKOFF 601 SEABREEZE BLVD. FT. LAUDERDALE, FL 33316

CINDY REILLY, DIRECTOR 601 SEABREEZE BLVD. FT. LAUDERDALE, FL 33316

LOIS ANN HESSER, DIRECTOR 601 SEABREEZE BLVD. FT. LAUDERDALE, FL 33316

TIM SMITH, DIRECTOR 601 SEABREEZE BLVD. FT. LAUDERDALE, FL 33316

ALICE KEMPTHORNE, DIRECTOR 601 SEABREEZE BLVD. FT. LAUDERDALE, FL 33316

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