

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002163

1. Entity Name

PALATKA RIVERBOAT, INC.

Principal Place of Business

201 N 2ND ST  
PALATKA FL 32177

Mailing Address

201 N 2ND ST  
PALATKA FL 32177

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3528711

Applied For

Not Applicable

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

BUSH, ALLEN R  
201 N 2ND ST  
PALATKA FL 32177

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. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE V ☐ Delete  
NAME HENLEY, JOHN R  
STREET ADDRESS PO BOX 374 N/A  
CITY-ST-ZIP BOSTWICK FL 32007

TITLE P ☐ Delete  
NAME BROWN, MARY LAWSON  
STREET ADDRESS 109 S 9TH ST  
CITY-ST-ZIP PALATKA FL 32177

TITLE D ☐ Delete  
NAME KITCHENS, ALLEGRA  
STREET ADDRESS 1027 S 12TH ST  
CITY-ST-ZIP PALATKA FL 32177-6001

TITLE T ☒ Delete  
NAME SNYDER, CLINT  
STREET ADDRESS P O BOX 1901  
CITY-ST-ZIP PALATKA FL 32177

TITLE S ☐ Delete  
NAME BANKS, DEBORAH J  
STREET ADDRESS 201 N. 2ND ST  
CITY-ST-ZIP PALATKA FL 32177

TITLE D ☐ Delete  
NAME FOLTIS, CONSTATINE  
STREET ADDRESS 136 CEDAR CREEK RD  
CITY-ST-ZIP PALATKA FL 32177

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE ☒ Change ☐ Addition  
NAME Sandra Bailey  
STREET ADDRESS 303 S Prospect St  
CITY-ST-ZIP Crescent City, FL 32112

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 all other like empowered.

SIGNATURE: *[Signature]*

7/19/01 904329-0103

FILED  
Aug 06, 2001 8:00 am  
Secretary of State

08-06-2001 90074 028 \*\*\*\*61.25

774173



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)