# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Sep 23, 2002**
**Secretary of State**

DOCUMENT# N99000005066

**Entity Name:** VOLUSIA COUNTY AIRBOATERS, INC.

**Current Principal Place of Business:**

399 PARK DRIVE
DELAND, FL 32724

**New Principal Place of Business:**

**Current Mailing Address:**

399 PARK DRIVE
DELAND, FL 32724

**New Mailing Address:**

**FEI Number: 59-3658960** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JOHNS, TONY O SR.
399 PARK DRIVE
DELAND, FL 32724

**Name and Address of New Registered Agent:**

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:**

| | | |
|---|---|---|
| Title: | PD | ( ) Delete |
| Name: | ROBERTS, DOUG | |
| Address: | 127 N VOLUSIA AVE | |
| City-St-Zip: | PIERSON, FL 32180 | |
| Title: | VP | ( ) Delete |
| Name: | MANZO, AL | |
| Address: | 127 N VOLUSIA AVE | |
| City-St-Zip: | PIERSON, FL 32180 | |
| Title: | S | ( ) Delete |
| Name: | WATERS, JENNIFER | |
| Address: | 127 N VOLUSIA AVE | |
| City-St-Zip: | PIERSON, FL 32180 | |
| Title: | TD | ( ) Delete |
| Name: | JOHNS, TONY D | |
| Address: | 399 PARK DR | |
| City-St-Zip: | DELAND, FL 32724 | |
| Title: | BOD | ( ) Delete |
| Name: | PETERSON, ARTHUR | |
| Address: | PO BOX 37 2180 WEST STREET | |
| City-St-Zip: | DELEON SPRINGS, FL 32120 | |
| Title: | | ( ) Delete |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | PD | (X) Change ( ) Addition |
| Name: | JOHNS, TONY O | |
| Address: | 399 PARK DR | |
| City-St-Zip: | DELAND, FL 32724 | |
| Title: | VP | (X) Change ( ) Addition |
| Name: | SNELLENBURGER, ROY | |
| Address: | 390 PARK DR | |
| City-St-Zip: | DELAND, FL 32724 | |
| Title: | S | (X) Change ( ) Addition |
| Name: | JOHNS, KIM D | |
| Address: | 399 PARK DR | |
| City-St-Zip: | DELAND, FL 32724 | |
| Title: | TD | (X) Change ( ) Addition |
| Name: | PETERSON, KAY | |
| Address: | 31618 CR 42 | |
| City-St-Zip: | DELAND, FL 32724 | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | BOD | ( ) Change (X) Addition |
| Name: | COLEMAN, RICKY | |
| Address: | 1325 KENT RD | |
| City-St-Zip: | DELAND, FL 32724 | |

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: TONY O JOHNS PD 09/23/2002

Electronic Signature of Signing Officer or Director — Date