FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBÉ)

FILED Apr 15, 2003 8:00 am

DOCUMENT # DODAMA 199) 8				Secretary of State		
DOCUMENT # P0000029928 1. Entity Name				04-15-2003 90108 039 ***150.00		
First Light Marina of Florida Inc						
er en en e	DO NOT WRITE	IN THIS SP	ACE			
				-		
2. Principal Place of Business 17953 San Carlos BlvD 17953 San Carlos			arlos Bluo.		• .	
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		Fort Myars 3	oach, FL	4. FEI Number 65-1006259	Applied For	
77'	19010 1025-0	zip 33931	Country	5. Certificate of Status Desired \$8.	Not Applicable 75 Additional	
^{∠™} 33°	101 Lee] 33131 [Lee	7. Name and Address of Current Registered Age	Required	
Name C+01				ven Dominic		
DO NOT WRITE Street Address I				P.O. Box Number is Not Agreptable)		
	IN THIS SP	ACE	1 1990	DOVI CARIOS DIOD.		
			CityCan	Nyers Beach FL	zip C 3 3 9 3 1	
8. The above		the purpose of changing its re	egistered office or register	ed agent, or both, in the State of Florida. I am familia		
the obligati	the obligations of registered agent.					
SIZMATURE.	Signature, typed or printed name of registered agent as	and title if applicable (NOTE:	Registered Agent signature required	4/10/03	2	
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Jai	nuary 1 - Nay 1 Fee is \$150.00 💨	G.C.	neglisered Agent Bigliature required		\$5.00 May Bo	
	nuary 1: May 1: Fee is \$150.00 After May 1: Fee is \$550.00 Amended UBR is \$61.25		regisered Agest agricule equac	Selection Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
	nuary,t - Nay 1 Fee is \$150,00 After May 1 Fee is \$550,00 Amended UBR is \$61.25 Payable to Florida Department of OFFICERS AND I	Siate		Election Campaign Financing		
Make Check 10.	nuary.t. May.1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of OFFICERS AND DIFFICERS AND DIFFICERS.	State : DIRECTORS		9. Election Campaign Financing Trust Fund Contribution.		
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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 607, Florida Statutes: and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #