## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 10, 2001 8:00 am Secretary of State DOCUMENT # P0000037612 1. Entity Name A-TEAM MARINE, INC. 01-10-2001 90084 029 \*\*\*150.00 Mailing Address Principal Place of Business POST OFFICE BOX 14310 POST OFFICE BOX 14310 **BRADENTON FL 34280** BRADENTON FL 34280 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-1000074 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Zip 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City BRADENTON registered agent, or both, in the State of Florida 8. The above named entity submits this statement for the purpose of changing its registered office FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Added to Fees Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME RANKIN, JOHN JR. NAME STREET ADDRESS 9210 19TH DRIVE NORTHWEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** Change ☐ Addition TITLE ☐ Delete TITLE NAME RANKIN, NANETTE NAME STREET ADDRESS 9210 19TH DRIVE NORTHWEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Change ☐ Addition . Delete TITLE HAMILTON, ROBERT NAME STREET ADDRESS STREET ADDRESS 1344 RANCHERO DRIVE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34240 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other tipe empowered. CITY-ST-7IP

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AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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1-8-7001 (941)