2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000060415 1. Entity Name MASTERCRAFT, INC.				Apr 20, 2001 8:00 am Secretary of State 04-05-2001 90077 027 ***150.00
Principal Pla	ice of Business	Mailing Address	<u> </u>	-
3384 NW 23 COURT BOCA RATON FL 33431		3384 NW 23 COURT BOCA RATON FL 33431		- 38204
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number 65-1015176 Applied For Not Applicable.
Zip	Country	Zip	Country .	5. Certificate of Status Desired
	6. Name and Address of Current			7. Name and Address of New Registered Agent
CAMPBELL, STANLEY W JR 1915 HOLLYWOOD BLVD HOLLYWOOD FL 33020 FL Zip Code City FL Zip Code				
SIGNATURE =9:=This:corp Tax filing	Oration is eligible to satisfy its Intangible requirement and elects to do so.	and title if applicable. (NOT	MOILQLU TE Registered Agent signature require III_FEE.IS.\$150.00 001 Fee will be \$550.00	10=Election Gampaign Financing \$5:00 May Be
(See crite	ria on back) OFFICERS AND		ble to Department of Str	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P QUINN, WILLIAM F.H. 271 NE 26 STREET BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition Change Addition Change Addition Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CIMORELLI, MICHAEL A	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP	☐ Change ☐ Addition 문
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of the cor	on this report or supplemental report is poration or the receiver or the stee empo- or on an attachment with at address, v	true and accurate and that n wered to execute this report	ny signature shall have the as required by Chapter 60:	ection 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 11 or Block 12 if
JIGHAI		RINTED HAME OF SIGNING OFFICER	OR DIRECTOR	Date Daylime Phone #