

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 20, 2001 8:00 am**  
**Secretary of State**

08-20-2001 90068 027 \*\*\*150.00

0098333 AV

**DOCUMENT # P00000061478**

1. Entity Name

**BOATSIDE SERVICES OF THE SUN COAST, INC.**

Principal Place of Business

**3412 CLARK ROAD, STE 134  
 SARASOTA FL 34231**

Mailing Address

**3412 CLARK ROAD, STE 134  
 SARASOTA FL 34231**

2. Principal Place of Business

**7006 Bridle Path Ct.**

Suite, Apt. #, etc.

3. Mailing Address

**7006 Bridle Path Ct.**

Suite, Apt. #, etc.

City & State

**UNIVERSITY PARK FL**

City & State

**UNIVERSITY PARK FL**

Zip

**34201**

Country

**Manatee**

Zip

**34201**

Country

**Manatee**

4. FEI Number

**36-4375789**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**HORNBACK, CHARLES**

**3412 CLARK ROAD, STE 134  
 SARASOTA FL 34231**

7. Name and Address of New Registered Agent

Name  
**Charles Hornback**

Street Address (P.O. Box Number is Not Acceptable)

**7006 Bridle Path Ct.**

City  
**UNIVERSITY**

**PARK**

**FL**

Zip Code  
**34201**

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

*Charles Hornback*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**8-4-01**

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**

**After September 12, 2001 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHARLEVILLE, MICHAEL</b> <b>#9 RYAN STREET</b> <b>FESTUS MO 63028</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HORNBACK, LARRY</b> <b>PO BOX 245</b> <b>SIKESTON MO 63801</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HORNBACK, CHARLES</b> <b>3412 CLARK ROAD, STE 124</b> <b>SARASOTA FL 34231</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 like empowered.

SIGNATURE:

*Charles Hornback*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-1-01**

Date

**941 907-2927**

Daytime Phone #

CR2E034 (5/01)



ATTACHMENT  
A0081924

7006 BRIDLE PATH CT.  
UNIVERSITY PARK FL 34201  
941-907-2927

P00000061478

August 14, 2001

To whom it may concern:

I am sending you my UBR report with a check for \$150.00 dollars. I am aware that this is late, however I never received my notice the first to the year. I spoke with Andy Dunlap on August 14th, (8501-245-6036) he recommended that I handle this issue in the manner that I am

Thank you

A handwritten signature in cursive script, appearing to read "Charles Hornback".

Charles Hornback