

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 21, 2001 8:00 am
Secretary of State

06-21-2001 90004 016 ***150.00

DOCUMENT # P00000071016

1. Entity Name

S & G MARINE, INC.

Principal Place of Business

**3845 GRIFFIN VIEW DRIVE
 LADY LAKE FL 32159**

Mailing Address

**3845 GRIFFIN VIEW DRIVE
 LADY LAKE FL 32159**

2. Principal Place of Business

**27 BLAIRMORE PL.
 Suite, Apt. #, etc.**

3. Mailing Address

**27 BLAIRMORE PL.
 Suite, Apt. #, etc.**

City & State

PAUM COAST FLA.

Zip

32137

Country

FLORIDA

City & State

PAUM COAST FLA.

Zip

32137

Country

FLORIDA

4. FEI Number

59-3656619

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**TREADWAY, GINGER D
 3845 GRIFFIN VIEW DRIVE
 LADY LAKE FL 32159**

7. Name and Address of New Registered Agent

**NAME: RICHARD S. BUTLER
 STREET ADDRESS (P.O. Box Number is Not Acceptable):
 3845 GRIFFINVIEW DR.
 CITY: LADY LAKE FLA. FL ZIP CODE: 32159**

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 **Richard S. Butler**
Signature, typed or printed name of registered agent and title if applicable.

Richard S. Butler
(NOTE: Registered Agent signature required when reinstating)

4-16-01
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 \$150.00

After MAY 1, 2001 Fee will be \$550.00

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	DP	<input type="checkbox"/> Delete
NAME	TREADWAY, GINGER D	
STREET ADDRESS	3845 GRIFFIN VIEW DRIVE	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GINGER D. BUTLER	
STREET ADDRESS	3845 GRIFFINVIEW DR.	
CITY-ST-ZIP	LADY LAKE FLA. 32159	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD S. BUTLER	
STREET ADDRESS	3845 GRIFFINVIEW DR.	
CITY-ST-ZIP	LADY LAKE FLA. 32159	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 like empowered.

SIGNATURE **Richard S. Butler**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)