

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2002 8:00 am**  
**Secretary of State**

02-21-2002 90145 044 \*\*\*150.00

**DOCUMENT # P00000083874**

1. Entity Name  
**THE RIGHT SIDE BOAT WORKS, INC.**

Principal Place of Business

**50 N. LAURA ST., #3100  
 JACKSONVILLE FL 32202**

Mailing Address

**50 N. LAURA ST., #3100  
 JACKSONVILLE FL 32202**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**50 N. Laura Street**

Suite, Apt. #, etc.  
**Suite 2750**

City & State  
**Jacksonville, FL**

Zip  
**32202**

Country

3. Mailing Address

**50 N. Laura Street**

Suite, Apt. #, etc.  
**Suite 2750**

City & State  
**Jacksonville, FL**

Zip  
**32202**

Country

4. FEI Number **59-3675114**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**BRANT, MOORE, MACDONALD & WELLS, P.A.  
 50 N. LAURA ST., #3100  
 JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name  
**Brant, Abraham, Reiter & McCormick, P.A.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**50 N. Laura Street, Suite 2750**

City  
**Jacksonville** **FL** Zip Code  
**32202**

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

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**2-4-02**

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, 2002 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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D ROSA, DENNIS**  
**121 OCEANFOREST DR. N**  
**ATLANTIC BEACH FL 32233** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D BRANT, HUNTER P**  
**1365 CADDELL DR.**  
**JACKSONVILLE FL 32217** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D BRANT, WILLIAM P**  
**1365 CADDELL DR.**  
**JACKSONVILLE FL 32217** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
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TITLE  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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☐ Change ☐ 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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**2-4-02**

Daytime Phone #

**904-358-2750**

CR2E034 (9/01)

Attachment Document# P00000083874



BRANT, ABRAHAM, REITER & MCCORMICK, P.A.

823756

~ ATTORNEYS AND COUNSELLORS ~

Amy H. Johnson  
ahjohnson@barm-law.com

February 6, 2002

Secretary of State of Florida  
Corporate Division  
Department of State  
George Firestone Building  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: The Right Side Boat Works, Inc.

Dear Sir/Madam:

Please find enclosed the Uniform Business Report for The Right Side Boat Works, Inc. and a check for \$150 for the filing fee. If you have any questions, please do not hesitate to call me.

Very truly yours,

A handwritten signature in cursive script that reads 'Amy Johnson'.  
Amy H. Johnson

AHJ/rla  
Enclosures  
182867.1