2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003
Secretary of State

DOCUMENT# P00000108215

Entity Name: DOLPHIN VACATIONS OF S.W. FLORIDA, INC.

Current Principal Place of Business:

2103 SE 5TH CT
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

2103 SE 5TH CT
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-1066471 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARTWICH, JUERGEN
2128 SW 47TH TERR
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: WEBER, UDO
Address: 2103 SE 5TH CT
City-St-Zip: CAPE CORAL, FL 33990

Title: VSD ( ) Delete
Name: WEBER, CLAUDIA
Address: 2103 SE 5TH CT
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WEBER P 01/10/2003

Electronic Signature of Signing Officer or Director Date