

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P00000114102**

1. Entity Name

Wilson Boat Works, Inc.

Principal Place of Business

426 Shadow Wood Lane
Coral Springs, FL 33071

Mailing Address

426 Shadow Wood Lane
Coral Springs, FL 33071

2. Principal Place of Business

561 S.W. Flagler Avenue

3. Mailing Address

561 S.W. Flagler Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pompano Beach, Florida

City & State

Pompano Beach, Florida

Zip

33060

Country

USA

Zip

33060

Country

USA

4. FEI Number

59-3704214

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

100004494051--7
-07/24/01--01089--004
****150.00 ****150.00

6. Name and Address of Current Registered Agent

Bruce E. Winter, Esq.
2300 Corporate Blvd., N.W.
Suite 137
Boca Raton, FL 33431

7. Name and Address of New Registered Agent

Name
Lee Max Rothman, Esq.
Street Address (P.O. Box Number is Not Acceptable)
2295 Corporate Blvd., N.W., Suite 134
City
Boca Raton
FL
Zip Code
33431

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

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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
NAME
STREET ADDRESS
CITY-ST-ZIP
P/T/D
James Wilson
561 S.W. Flagler Avenue
Pompano Beach, FL 33060

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/S
Brenda Stassen
561 S.W. Flagler Avenue
Pompano Beach, FL 33060

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
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CITY-ST-ZIP
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SP

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 and typed or printed name of signing officer or director

7/5/01 (954) 214-3372

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL 17 AM 8:47

CR2E034 (11/00)

WILSON BOAT WORKS, INC.
561 SW FLAGLER AVE
POMPANO BEACH, FL 33060

ATTACHMENT
Pg 2 of 2

June 21, 2001

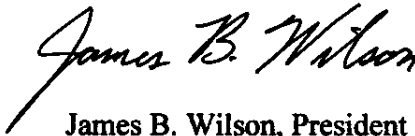
Florida Department of State
Tallahassee, Florida

To Whom it May Concern:

Please allow me to file my corporation papers at this time without any penalty, as the papers we were sent the first time were incorrect and caused confusion regarding the entire process. When I did receive the correct forms, I was unable to file them immediately as my mother was gravely ill and subsequently passed away. I was her sole caretaker, and legally responsible party for all of her affairs, in which I am still trying to complete.

Thank you for your understanding regarding this matter.

Sincerely,


James B. Wilson, President