

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00054

1. Entity Name

HURRICANE ISLAND OUTWARD BOUND SCHOOL, CORPORATI

Principal Place of Business

Mailing Address

75 MECHANIC ST
ROCKLAND ME 04841
US

75 MECHANIC ST
ROCKLAND ME 04841-3513
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-6089174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MULEY, MICHAEL J.
177 SALEM CT
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	WELSH, JOAN	MECHANIC STREET	ROCKLAND ME	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
V	THIEME, DONALD	MECHANIC STREET	ROCKLAND ME	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	MILLER, EDWARD M	MECHANIC STREET	ROCKLAND ME	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	FRISCH, RICHARD W	MECHANIC STREET	ROCKLAND ME	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	SMITH, CATHERINE W.	MECHANIC STREET	ROCKLAND ME	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	D	REMINGTON, JOHN	MECHANIC STREET	ROCKLAND, ME 04841	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

Donald Thieme

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/1/00

207-594-1401

Daytime Phone #

CR2E037 (9/99)