2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Sep 04, 2002 8:00 am Secretary of State P01000069795 DOCUMENT # 1. Entity Name BAYSIDE MARINE CANVAS PRODUCTS, INC. 09-04-2002 90088 029 ***550.00 Principal Place of Business Mailing Address 103100-11 OVERSEAS HIGHWAY 103100-11 OVERSEAS HIGHWAY KEY LARGO FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHAFFER, RICHARD E Street Address (P.O. Box Number is Not Acceptable) 103100-11 OVERSEAS HIGHWAY KEY LARGO FL 33037 City Zip Code 8. The above named entity submits this statement for the Julpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE T applicable (NOTE: Registered Agent signature required when reinstating) This corporation is eligible to satisfy its Intangible FILE NOW!!L FEE IS \$150.00 -10.-Election Campaign Financing \$5:00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See critaria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete CR2E034 (9/01) TITLE ☐ Change ☐ Addition SHAFFER, RICHARD E NAME NAME STREET ADDRESS 103100-11 OVERSEAS HIGHWAY STREET ADDRESS CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME CUTLER, I. DAVID NAME STREET ADDRESS 103100-11 OVERSEAS HIGHWAY STREET ADDRESS CITY-ST-7IP KEY LARGO FL 33037 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

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