## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** 

P02000034247

1. Entity Name



## **FILED** Apr 26, 2004 8:00 am Secretary of State

04-26-2004 90525 012 \*\*\*150.00

MASTERCRAFT PRODUCTS CORPORATION				3			
	DO NOT WRITE	IN THIS SI	PACE		540410	23	
,	ace of Business AKE WINONA ROAD #, etc.	3. Mailing Address P.O. BOX 11 Suite, Apt. #, etc.	.O. BOX 117		DO NOT WRITE IN THIS SPACE		
City & State	s SPRINGS FL 3213	City & State  DELLEON SPI	RINGS FI.		FEI Number 75 – 3067745		Applied For Not Applicable
Zip 32130	Tip Country Zip			5. Certificate of Status Desired \$8.75 Additional		75 Additional	
32130	( AODODIA	1 32 1 3 U	VOLUSIA	7. N	lame and Address of Current Re		<u> </u>
		The second secon	Name				
	DO NOT W	A S - A CHAP A CARDON PRODUCTION OF	_Street Ac		Box Number is Not Acceptable) – IRONWOOD DRIVE		
	IN THIS SP	AUC	Page Lini	and F	L 32 <b>73</b> 0		
		1 (4-36) (35) 45-46)	494.				
	named entity submits this statement for jobs of registered agent.	the purpose of changing its	registered office or	registered as	gent, or both, in the State of Florid	a. I am familia	r with, and accept
SIGNATURE .	Juge Ohn	cald					
	Signature, typed/or printed trame of registered agent a nuarry 1 - May 1 Fee is \$150.00	nd title if applicable. (NOT	E: Registered Agent signatur	e required when	reinstating)	DATE	
1994	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of	State			Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees
10.	OFFICERS AND	ACT AT A PART AND A PART A					7.75
TITLE	PRESIDENT & BOAR	D MEMBER	TITLE TO SERVICE STATES				and company of the
NAME ,	A. DAVID LOGAN	NAME					
STREET ADDRESS CITY-ST-ZIP	5797 LAKE WINONA	STREET ADDRESS CITY_ST-ZIP					
TITLE	DE LEON SPRINGS SECRETARYT& BOAR	<del>FL 32130</del> D MEMBER	TITLE			elle (SIP) Tele Stransference (ed elle e	To send the send of the send o
NAME	JOYCE MONACO		NAME				
STREET ADDRESS	5797 LAKE WINONA	ROAD	STREET ADDRESS				The second secon
CITY-ST-ZIP	DE EEON SPRINGS		Ctty-\$1-ZiP			<b>*</b>	
TITLE _ NAME	_TREASURERM&NBOAR   MARIE A. MONACO	D MEMBER	TITLE NAME		. 1995 - Archael Berne, archael ann a <u>ntail an an Aire</u> 1995 - Archael Archael an Aireann an Airean	# 100 to 1	Art Carlotte and C
STREET ADDRESS	5797 LAKE WINONA	ROAD	STREET ADDRESS		DO NOT V	WOITE	
CITY-ST-ZIP	DE LEON SPRINGS		CITY-ST-ZIP	29 May 18 9	e de la companya de La companya de la companya de	VIXIII	Turn Santaka ya kumil
TITLE	BOARD MEMBER		TITLE	re la faire	IN THIS S	PACE	
NAME STREET ADDRESS	EDWARD RINDERLE	NAME STREET ADDRESS					
CITY-ST-ZIP	5797 LAKE WINONA		CITY-ST-ZIP		en de la companya de La companya de la co		
TITLE	<del>DE LEON SPRINGS</del> BOARD MEMBER	<del>DFL 32130 -</del>	TIFLE	in the Problem	nero mondo al Danto do Político de Principal	emilia tar é	11 新大学的
NAME	DOROTHY M ROBBIN	NAME		<ul> <li>A service of the control of the contro</li></ul>		The state of the s	
STREET ADDRESS CITY-ST-ZIP	5797 LAKE WINONA		STREET ADDRESS  CITY ST-ZIP		the state of the second	A Share	- 大學等級
TITLE	DE LEON SPRINGS	FL 32130	TITLE		A BENEFIT OF THE SECOND	Maria Barata da Salamana Maria da Maria	
NAME			NAME	ALAY			
STREET ADDRESS			STREET ADDRESS				A STATE OF THE STA
CITY~ST-ZIP	<u> </u>		CITY+SI+ZIP	e e e e e e e e e e e e e e e e e e e	440.07(0V)) FI	1991 1991 1984 1574	
12. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	this filing does not qualify for true and accurate and that	or the exemption state my signature shall he	ed in Section ave the same	n T19.07(3)(1), Florida Statutes. I fu e legal effect as if made under oat florida Statutes: and that my pami	irtner certify this that I am ar	natine information n officer or director

of the corporation or the receiver or trustee empowered attachment with an address, with all other like empowered

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034B (12/02)