

FILED  
Jun 13, 2003 8:00 am  
Secretary of State

05-01-2003 90277 043 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

5/1/21

55048080

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| <b>DOCUMENT # P02000058398</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       |                     |                                                              |           |      |
| 1. Entity Name<br>CASTLEBERRY'S MARINE, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                     |                                                              |                                                                                            |      |
| Principal Place of Business<br>808 N. FERDON BLVD.<br>CRESTVIEW FL 32536                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                       |                     | Mailing Address<br>808 N. FERDON BLVD.<br>CRESTVIEW FL 32536 |                                                                                            |      |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       |                     | 3. Mailing Address                                           |                                                                                            |      |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |                     | Suite, Apt. #, etc.                                          |                                                                                            |      |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                     | City & State                                                 |                                                                                            |      |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       | Country             |                                                              | Zip                                                                                        |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                     |                                                              |                                                                                            |      |
| 4. FEI Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                     |                                                              | <input checked="" type="checkbox"/> Applied For<br><input type="checkbox"/> Not Applicable |      |
| 5. Certificate of Status Desired                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |                     |                                                              | <input type="checkbox"/> \$9.75 Additional Fee Required                                    |      |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                     |                                                              | 7. Name and Address of New Registered Agent                                                |      |
| CASTLEBERRY, WYNDON<br>808 N. FERDON BLVD.<br>CRESTVIEW FL 32536                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |                     |                                                              | 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                     |                                                              |                                                                                            |      |
| SIGNATURE _____ (NOTE: Registered Agent signature required when withdrawing)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                     |                                                              |                                                                                            |      |
| DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                       |                     |                                                              |                                                                                            |      |
| FILE NOW!! FEE IS \$150.00<br>After May 1, 2003 Fee will be \$550.00<br>Make Check Payable to Florida Department of State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                       |                     |                                                              |                                                                                            |      |
| 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                     |                                                              |                                                                                            |      |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                       |                     |                                                              |                                                                                            |      |
| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                       |                     |                                                              |                                                                                            |      |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                       |                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11        |                                                                                            |      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | NAME                  | STREET ADDRESS      | CITY-ST-ZIP                                                  | TITLE                                                                                      | NAME |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | D CASTLEBERRY, WYNDON | 808 N. FERDON BLVD. | CRESTVIEW FL 32536                                           |                                                                                            |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                     |                                                              |                                                                                            |      |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                     |                                                              |                                                                                            |      |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered. |                       |                     |                                                              |                                                                                            |      |
| SIGNATURE: <u>Wyndon Castleberry</u> 4-28-03 - 850-687-1573                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                       |                     |                                                              |                                                                                            |      |