

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2003 8:00 am
Secretary of State

07-10-2003 90120 032 ***150.00

DOCUMENT # P02000097456

1. Entity Name

TIDEWATER CAPITAL MANAGEMENT, INC.



Principal Place of Business

**5208 N.E. 24TH TERRACE
318
FORT LAUDERDALE FL 33308**

Mailing Address

**650 PINE DRIVE
4
POMPANO BEACH FL 33060**

2. Principal Place of Business

**505 S. FLAGLER DRIVE
SUITE 405
WEST PALM BEACH**

3. Mailing Address

Suite, Apt. #, etc.

City & State

WEST PALM BEACH

City & State

Zip
33401

Country
PALM BEACH

Zip

Country

4. FEI Number

223869495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

TUYN, BRADLEY P

650 PINE DRIVE

4

POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **TUYN, BRADLEY P**
STREET ADDRESS **650 PINE DRIVE, APT 4**
CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE **S** ☒ Delete
NAME **TUYN, PETER E**
STREET ADDRESS **5541 MAIN STREET**
CITY-ST-ZIP **WILLIAMSVILLE NY 14221**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **NEW SECRETARY, VP** ☐ Change ☒ Addition
NAME **DAVID GARNHAM**
STREET ADDRESS **3520 S. OCEAN BLVD, STE 603H**
CITY-ST-ZIP **PALM BEACH, FL 33480**

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

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

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

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

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

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 607, 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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULY 1, 2003

Date

954-610-5600

Daytime Phone #

CR2E034 (4/03)