

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90064 018 ***158.75

DOCUMENT # P03000138708

1. Entity Name
SEA LAND TOWING & MOTOR SPORTS, INC.



Principal Place of Business
**16151 PINE RIDGE ROAD
BUILDING #3
FORT MYERS, FL 33908**

Mailing Address
**16151 PINE RIDGE ROAD
BUILDING #3
FORT MYERS, FL 33908**

44013783



02202004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

16161 Pine Ridge Rd

Suite, Apt. #, etc.

Building #3

City & State

Fort Myers, FL

Zip

33908

Country

3. Mailing Address

16161 Pine Ridge Rd

Suite, Apt. #, etc.

Building #3

City & State

Fort Myers, FL

Zip

33908

Country

4. FEI Number

20-0432508

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
MONTANO, MICHAEL R
16151 PINE RIDGE ROAD BUILDING #3
FORT MYERS, FL 33908**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**16161 Pine Ridge Rd, Bldg #3
Fort Myers, FL 33908**

☒ Change ☐ Addition

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

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☐ Change ☐ Addition

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:

Michael Montano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #