CR2E034 (10/00)

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 02, 2001 8:00 am Secretary of State DOCUMENT # **P14327** 1. Entity Name 04-02-2001 90433 001 ***211.25 NASSAU TERMINALS INC. Principal Place of Business Mailing Address 501 NORTH 3RD ST 501 NORTH 3RD ST Fernandina Beach Fl 32034 FERNANDINA BEACH FL 32034 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 06-1184991 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD **PLANTATION FL 33324** Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DΛ ☐ Change ☐ Addition TITLE TITLE **⊠**elete VORSTER, MAARSEN P NAME NAME STREET ADDRESS **WESTERLAN 10** STREET ADDRESS 3016 CK ROTTERDAM NL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE CHIECO, MICHAEL G NAME NAME STREET ADDRESS 46 SOUTHFIELD AVE, THREE STAMFORD LANDING STREET ADDRESS CITY-ST-ZIP STAMFORD CT CITY-ST-ZIP VST---___ Delete TITLE Change Addition TITLE SCHWEC, VALDEMAR NAME **501 NORTH THIRD ST** STREET ADDRESS STREET ADDRESS FERNANDINA BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition STUBBS, W. NAME NAME **501 NORTH THIRD ST** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FERNANDINA BEACH FL CITY-ST-7IP ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME

13. I hereby certify that the information supplied with this filing does of 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 distance empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an appears, with all principles of the corporation of the corporation of the corporation of the receiver or distance.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP ·

TITLE

NAME

ED NAME OF SIGNING OFFICER OR

Delete

904 261 0753

Change

☐ Addition