

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P36905

1. Entity Name

BLUEWATER BAY MANAGEMENT COMPANY

**FILED**  
**Mar 13, 2000 8:00 am**  
**Secretary of State**

03-13-2000 90028 008 \*\*\*150.00

Principal Place of Business

Mailing Address

1950 BLUEWATER BLVD.  
NICEVILLE FL 32578  
US

1950 BLUEWATER BLVD  
NICEVILLE FL 32578-3879  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **58-2036286**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICHARD TUCKER**  
**1950 BLUEWATER BLVD.**  
**NICEVILLE FL 32578**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>D</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>WERNER, HELMUT K.</b>	<b>1175 PEACHTREE ST., N.E.</b>	<b>ATLANTA GA</b>				
	<b>D</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>DAIBERL, BERT</b>	<b>1386 SUNSET BEACH DRIVE</b>	<b>NICEVILLE FL</b>				
	<b>P</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>HARROLD, THOMAS J. JR.</b>	<b>100 GALLERIA PKY NW 12TH FL</b>	<b>ATLANTA GA 30339</b>				
	<b>D</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>LANG, KLAUS</b>	<b>ROTER BUEHL 12</b>	<b>72419 NEUFRA GE</b>				
	<b>D</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>HAISERMANN, KARL-HEINZ</b>	<b>1382 SUNSET BEACH DRIVE</b>	<b>NICEVILLE FL</b>				
	<b>CD</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>BREITSCHWERDT, WERNER</b>	<b>HAUPTMANNSREUTE 138</b>	<b>70193 STUTTGART GE</b>				

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard E. Tucker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**RICHARD E. TUCKER**

Date

**3-8-00**

Daytime Phone #

**850-897-3613**

CR2E034 (3/9/01)