

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000034962

1. Entity Name

WEST FLORIDA WIRE ROPE, RIGGING AND HARDWARE, INC.

Principal Place of Business

1901 EAST AVE.
PANAMA CITY FL 32405
US

Mailing Address

1901 EAST AVE.
PANAMA CITY FL 32405
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

4. FEI Number

59-3182939

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOWDISH, RALPH L
2814 WEST 22ND ST
PANAMA CITY FL 32405

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.

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. 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 D
NAME ROCHESTER, WILLIAM L JR
STREET ADDRESS 500 BUNKERS COVE RD
CITY-ST-ZIP PANAMA CITY FL 32401 Delete Change AdditionTITLE D
NAME BOWDISH, RALPH L
STREET ADDRESS 2814 W 22 ST
CITY-ST-ZIP PANAMA CITY FL 32405 Delete Change AdditionTITLE Delete Change AdditionTITLE Delete Change AdditionTITLE Delete Change AdditionTITLE Delete Change Addition

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: *Ralph L. Bowdish*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

decolor

Date

Daytime Phone #

CR2E034 (9/01)

6984700
AVFILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90239 011 ***150.00