## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT #

P93000085257

1. Entity Name

BOAT HOUSE DISCOUNT MARINE, INC.



**FILED** Mar 26, 2003 8:00 am §
Secretary of State

03-26-2003 90128 014 \*\*\*158.75

					1				
394 ARROW	ce of Business HEAD LANE E BEACH FL 32951	394 ARROW	Mailing Address 394 ARROWHEAD LANE MELBOURNE BEACH FL 32951						
2. Principal I	Place of Business	3. Mailing Address							
Suite, Apt	#, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State			4. 1	FO-22221EG			pplied For ot Applicable
Zip	Country	Zip	(	Country	5. (	Certificate of Status Desired		8.75 Add	ditional
6. Name and Address of Current Registered Agent					7. 1	Name and Address of New Reg	istered Ag	jent	
				Name				-	
394 ARR	CHARLES M OWHEAD LANE		Street Addres			s (P.O. Box Number is Not Acceptable)			
MELBOU	RNE BEACH FL 32951								
÷				City			FL Zip Code		
	e named entity submits this statement itions of registered agent.  Signature, typed or printed name of registered ager			istered office or regis		,	da. I am fai	niliar with,	and accept
		and the rapplicable.	(NOTE: No	gistored Agent alguature requ	uned when to	mataurigi	DAIE		
	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00		· · · · · · · · · · · · · · · · · · ·			9. Election Campaign Finar	ncing	\$5.€	0-May-Bo
	r may 1, 2003 Fee will be \$550.00 k Payable to Florida Department (					Trust Fund Contribution.			d to Fees
10.	OFFICERS AND	1		11.	ΔD	L DITIONS/CHANGES TO OFFIC	EDS AND I	NECTOR	C INI 11
TITLE	DVP		Delete	TITLE	7.0	• • • • • • • • • • • • • • • • • • •		☐ Change	☐ Addition
NAME	GARDINER, DONALD R		Delete	NAME				Onange	Addition
STREET ADDRESS	418 ARROWHEAD LANE			STREET ADDRESS					
CITY-ST-ZIP	MELBOURNE BEACH FL	-		CITY-ST-ZIP					
TITLE	DP		Delete	TITLE			]	Change	Addition
NAME	FISHER, CHARLES M			NAME				_ ,	_
STREET ADDRESS	394 ARROWHEAD LANE			STREET ADDRESS					
CITY-ST-ZIP	MELBOURNE BEACH FL			CITY-ST-ZIP					
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CITY-ST-ZIP			1	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:** 

3.24.03