

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

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90241 024 ***150.00

DOCUMENT # P94000073289

1. Entity Name

The Pass-A-Grille Marina, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1901 Pass-A-Grille Way

Suite, Apt. #, etc.

3. Mailing Address

PO Box 46494

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
St. Pete Beach, FL

Zip
33706

Country

City & State
St Pete Beach, FL

Zip
33741

Country
USA

4. FEI Number
59-3279677

Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Falkenstein, Mary B
Street Address (P.O. Box Number is Not Acceptable)
801 Gulf Way

City
St Pete Beach FL Zip Code
33706

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Falkenstein, Mary B 1705 Pass A Grille Way St Pete Beach FL 33706
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Falkenstein, Dominick 6441 4th Palm Point St Pete Beach FL 33706
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD Falkenstein, Bruno 2401 Pass A Grille Way St Pete Beach FL 33706
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Bruno R. Falkenstein

Bruno Falkenstein

4/29/02

727-360-1313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)