2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 28, 2000 8:00 am Secretary of State DOCUMENT # P95000013822 1. Entity Name MARINE RANK OF THE FLORIDA KEYS 04-28-2000 90032 041 ***150.00 Principal Place of Business Mailing Address 11290 OVERSEAS HIGHWAY 11290 OVERSEAS HIGHWAY MARATHON FL 33050-3463 MARATHON FL 33050 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0414448 Not Applicable Zip Country \$8.75 Additional Country Zio 5. Certificate of Status Desired Fee Required -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent .--___ Name DANIELS, W.S. Street Address (P.O. Box Number is Not Acceptable) 11290 OVERSEAS HIGHWAY MARATHON FL 33050 Zip Code City Fl 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. \Box Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ★ Change TITLE VP C ☐ Delete TITLE Allison, John W. NAME NAME ALLISON, JOHN W 3303 Prince STREET ADDRESS STREET ADDRESS 3305 PRINCE Conway, AR CITY-ST-ZIP CITY-ST-ZIP CONWAY AR Change ☐ Addition ☐ Delete TITLE TС TITLE NAME BUCKHEIM, RICHARD A NAME Buckheim, Richard A. STREET ADDRESS STREET ADDRESS P.O. BOX 430362 P. O. Box 430362 CITY-ST-7IP CITY-ST-ZIP **BIG KEY PINE FL** Big Pine Key, FL 33043 ☐ Addition TITLE ☐ Change ☐ Delete TITLE S NAME NAME CONLIN: JOHN W STREET ADDRESS STREET ADDRESS 2557 SOMBRERO BLVD. CITY-ST-ZIP CITY-ST-7tP MARATHON FL TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME DANIELS, WILLIAM S STREET ADDRESS STREET ADDRESS 511 AVENIDA PRIMICERIA CITY-ST-ZIP CITY-ST-ZIP MARATHON FL ☐ Change ☐ Addition ☐ Delete TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE

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 attac

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

CITY-ST-7IP