

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90054 012 ***150.00

DOCUMENT

1. Entity Name P95000015892

BLUE HARBOUR EXPORT CORPORATION

Principal Place of Business

Mailing Address

2853 S.E. EAGLE DRIVE 2853 S.E. EAGLE DRIVE
 PORT SAINT LUCIE, FL. PORT SAINT LUCIE, FL.
 34984 34984

770590

2. Principal Place of Business

2853 S.E. EAGLE DRIVE

3. Mailing Address

2853 S.E. EAGLE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PORT SAINT LUCIE, FL.

City & State

PORT SAINT LUCIE, FL.

4. FEI Number

65-0562114

Applied For

Not Applicable

Zip

Country

34984 USA

Zip

Country

34984 USA

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

Name

Keaton, Lisa A.

Street Address (P.O. Box Number is Not Acceptable)

2853 S.E. EAGLE DRIVE

City

PORT SAINT LUCIE, FL.

FL

Zip Code 34984

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

LISA A. KEATON, DPVST

APRIL 27, 2001

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, 2001 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 D ☐ Delete
 NAME ZECCA, LISA K.
 STREET ADDRESS 2853 S.E. EAGLE DRIVE
 CITY-ST-ZIP PORT SAINT LUCIE, FL. 34984

TITLE D ☒ Change ☐ Addition
 NAME KEATON, LISA A.
 STREET ADDRESS 2853 S.E. EAGLE DRIVE
 CITY-ST-ZIP PORT SAINT LUCIE, FL. 34984

TITLE PVST ☐ Delete
 NAME ZECCA, LISA K.
 STREET ADDRESS 2853 S.E. EAGLE DRIVE
 CITY-ST-ZIP PORT SAINT LUCIE, FL. 34984

TITLE PVST ☒ Change ☐ Addition
 NAME KEATON, LISA A.
 STREET ADDRESS 2853 S.E. EAGLE DRIVE
 CITY-ST-ZIP PORT SAINT LUCIE, FL. 34984

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

LISA A. KEATON, DPVST

4/27/01

(561)879-7400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)