

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90317 044 ***150.00

DOCUMENT # P95000048816

1. Entity Name

BOAT DEALERS' ALLIANCE, INC.

Principal Place of Business

**21 EAST MAIN STREET
 MYSTIC CT 06355**

Mailing Address

**21 EAST MAIN STREET
 MYSTIC CT 06355**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

41-1822266

Applied For

Not Applicable

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

NAGIN, STEPHEN E

**3225 AVIATION AVENUE THIRD FLOOR
 MIAMI FL 33133-4741**

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 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
EXO OLSON, BRIAN ☐ Delete
21 EAST MAIN STREET
MYSTIC CT 06355

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VPD Larry Russo, SR. ☐ Change ☒ Addition
357 mystic Ave.
Medford, MA 02155

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD SOUCY, ROBERT ☐ Delete
SPRING POINT MARINE
SOUTH PORTLAND ME 04116

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D Ken Cope ☐ Change ☒ Addition
1725 WEST HWY 50
O'fallon, IL 62269

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VPD LUMPKIN, TONY ☒ Delete
2600 BUCK'S ISLAND ROAD
SOUTHSIDE AL 35907

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD KILLINGER, GENE ☐ Delete
84 WEST AIRPORT BOULEVARD
PENSACOLA FL 32503

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD CROCKER, KAY ☐ Delete
528 WAYNICK BOULEVARD
WRIGHTSVILLE BEACH NC 28480

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D FRANKLIN, FRANK ☒ Delete
25 SOUTH TERRELL STREET
METTER GA 30439

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ 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 another like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)