## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P95000050954**

872 N. FEDERAL HWY

**BOYNTON BEACH FL 33426** 

1. Entity Name

R & L SKI BOATS, INC.

Principal Place of Business

Mailing Address

1204 NW 7TH ST

Suite, Apt. #, etc.

LANTANA

33462

City & State

Zip

1204 NW 7TH ST

3. Mailing Address

City & State

Suite, Apt. #, etc.

LANTANA

33462

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.

BOYNTON BEACH FL 33426

2. Principal Place of Business

BOYNTON BEACH FL 33426-2921

872 N. FEDERALHWY

Country

## FILED May 13, 2000 8:00 am Secretary of State

05-13-2000 90024 015 \*\*\*150.00



6. Name and Address of Current Registered Agent

ROY, RONALD R
1204 NW 7TH ST

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

d agent and title if applicable

Name ROY RONALD R
Street Address (P.O. Box Number is Not Acceptable)

7. Name and Address of New Registered Agent

Sireet Address (r.O. Box Namber 13 Not Acceptable

872 N. FEDERAL

H 16 HWAY

Dity LANTAN A

(NOTE. Registered Agent signature required when reinstating)

FL Zip Code 33462

Fee Required

FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Change Delete TITLE TITLE ROY RONALD R 872 N. FEDERAL HWY ROY, RONALD R NAME 1204 N.W. 7TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF **BOYNTON BEACH FL 33426** Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS 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