2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2000 8:00 am
Secretary of State
08-08-2000 90013 048 ***150.00

DOCUMENT # P96000019692

1. Entity Name
TIMELESS MARINE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1600 S.E. 17TH STREET SUITE 404 FORT LAUDERDALE FL 33316	1203 MEMORIAL DR MANITOWOC WI 54220 Manitowoc

DO NOT WRITE IN THIS SPACE

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 65-0670851 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HAYES, WARREN D SR.
321 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
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	TITLE		☐ Change ☐ Addition
NAME	ROSS, DAVID		NAME		
STREET ADDRESS	1203 MEMORIAL DRIVE		STREET ADDRESS		
CITY-ST-ZIP	MANITOWOC MI 54220		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (5/00)

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: SIGNATURE REQUIRED 8/2/00 920-686-5104
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
DH-96-W-19692
DW76956

Katie and David Ross
1203 Memorial Dr.
Manitowoc, WI 54220

August 2, 2000

Customer Service
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Customer Service:

We were quite alarmed to receive your second notice! We changed our address last year on your form and do not believe that we received the first notice at the 1203 Memorial Dr. address.

If you check our past payment history, we have been very timely. We honestly would have made the payment earlier had we received the notice. Please consider our plea. We understand the seriousness of this payment have enclosed a check in the amount of $150.00.

If you need to reach me, please call 920-686-5104 (work) or 920-684-7373 (home) or E-mail me at kross@burgerboat.com. Thank you for your consideration.

Respectfully,

Katie Ross

Katie Ross

Enclosures