

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90133 004 ***150.00

DOCUMENT # P96000103792

1. Entity Name
FT. GATES FERRY & GATEWAY FISH CAMP, INC.



Principal Place of Business
**103 DOUGLAS ST
CRESCENT CITY, FL 32112**

Mailing Address
**103 DOUGLAS ST
CRESCENT CITY, FL 32112**

2. Principal Place of Business

3. Mailing Address



Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

59-3428544

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**HACKETT, RICHARD C
STAR ROUTE #1, BOX 350
CRESCENT CITY, FL 32112**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **HACKETT, RICHARD C**
CITY-ST-ZIP **STAR RTE 2, BOX 372A
CRESCENT CITY, FL**

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

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **HACKETT, CATHERINE C**
CITY-ST-ZIP **STAR RTE 2, BOX 372A
CRESCENT CITY, FL**

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

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **JONES, DALE L**
CITY-ST-ZIP **HC 1 BOX 350
CRESCENT CITY, FL 32112**

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

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **JONES, ELLA M**
CITY-ST-ZIP **HC 1 BOX 350
CRESCENT CITY, FL 32112**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard C. Hackett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-12-03

Date

386 467-2411
Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

90134247
P96000103792

May 12, 2003

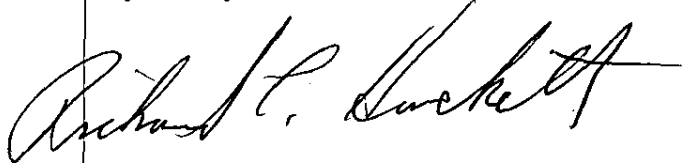
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Fed ID #59-34285444

Good Morning,

Enclosed you will find my Uniform Business Report. Please accept this with my payment. I never received a Uniform Business Report for this year so I called the Florida Department of State, Division of Corporations on 05-09-03. They told me to download the form on my computer, fill it out and send \$150.00 with a letter stating that I never received one. Thank you for your consideration in this matter.

Sincerely,



Richard C. Hackett
Owner of Fort Gates Ferry
& Gateway Fish Camp, Inc.