

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000001834

1. Entity Name

AGGRESSIVE CUSTOM BOATS, INCORPORATED

Principal Place of Business

1103 12TH AVE.
PALMETTO FL 34221

Mailing Address

1103 12TH AVE.
PALMETTO FL 34221

2. Principal Place of Business

1101 12 AVE

3. Mailing Address

2012 4TH ST W PALMETTO, FL 34201

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
PALMETTO FL

Zip
34221

Country
USA

City & State
PALMETTO FL

Zip
34221

Country
MANATEE

4. FEI Number

59-3418567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARRISON, DENNY C
2012 4TH ST W
PALMETTO FL 34221

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 \$150.00

After MAY 1, 2000 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GARRISON, DENNY C
2012 4TH ST W
PALMETTO FL 34221

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T
MARIANNE PARLW
12971 PELICAN LN
MADEIRA BCH, FL 33708

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
[Blank]

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T
MARIANNE PARLW
12971 PELICAN LN
MADEIRA BCH, FL 33708

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

☐ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Blank]

☐ 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 all other like empowered.

SIGNATURE:

DENNY GARRISON

04-19-00

Date

941-723-3939

Daytime Phone #

CR2E034 (9/99)