

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000019075

Entity Name: SNORKEL DESTIN, INC.

FILED
Apr 25, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

MOTOR VESSEL REEF RUNNER HARBORWALK MAR
SLIP #A12
DESTIN, FL

Current Mailing Address:

P.O. BOX 5199
DESTIN, FL 325405199

New Principal Place of Business:

MOTOR VESSEL REEF RUNNER HARBORWALK MAR
SLIP #A12
DESTIN, FL 32540

New Mailing Address:

FEI Number: 59-3430751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, BARRY S
63 SOUTH BLUE HERON ROAD
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLE, BARRY S
Address: 63 SOUTH BLUE HERON RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VD () Delete
Name: COLE, VIKKI R
Address: 63 SOUTH BLUE HERON RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY COLE

PD

04/25/2002

Electronic Signature of Signing Officer or Director

Date