

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90267 046 ***150.00

CR2E034 (10/02)

DOCUMENT # P97000026449

1. Entity Name
PREFERRED YACHT SALES, INC.



Principal Place of Business
101 16TH AVENUE SOUTH
#7
ST PETERSBURG FL 33701

Mailing Address
101 16TH AVENUE SOUTH
#7
ST PETERSBURG FL 33701

2. Principal Place of Business

3. Mailing Address

7963 Sailboat Key Blvd. S.
Suite, Apt. #, etc.
#301

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

South Pasadena, FL

Zip

Country

Zip

Country

33707

Pinellas

4. FEI Number 59-3435792

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GUTKNECHT, WILLIAM G
101- 16TH AVE SOUTH
SUITE #7
ST PETERSBURG FL 33701

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 reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	D GUTKNECHT, WILLIAM G 101 16TH AVENUE SOUTH #7 ST PETERSBURG FL 33701	<input type="checkbox"/> Delete
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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:

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/03
Date

727/822/5600
Daytime Phone #