

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 03, 2001 8:00 am**
Secretary of State

02-03-2001 90288 046 ***150.00

DOCUMENT # P97000038816

1. Entity Name

USA BOATING CENTER, INC.

Principal Place of Business

**4491 ANGLERS AVE.
FT. LAUDERDALE FL 33312**

Mailing Address

**4491 ANGLERS AVE.
FT. LAUDERDALE FL 33312**

2. Principal Place of Business

4550 Anglers Ave
Suite, Apt. #, etc.

3. Mailing Address

4550 Anglers Ave
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft Lauderdale, FL

City & State

Ft Lauderdale, FL

4. FEI Number

65-0757247

Applied For

Not Applicable

Zip

33312

Country

Broward

Zip

33312

Country

Broward5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**FITZPATRICK, MICHAEL
4491 ANGLERS AVE.
FT LAUDERDALE FL 33312**

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **SVD** ☐ Delete
NAME **EISELE, GEOFFREY R**
STREET ADDRESS **2048 SW 17TH ST**
CITY-ST-ZIP **POMPAHO BCH FL 33062**TITLE **PTD** ☐ Delete
NAME **FITZPATRICK, MICHAEL J**
STREET ADDRESS **5419 N.E. 22ND TERRACE**
CITY-ST-ZIP **FT LAUDERDALE FL 33308**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SVD** ☒ Change ☐ Addition
NAME **Geoffrey R. Eisele**
STREET ADDRESS **718 SE 13TH ST**
CITY-ST-ZIP **Ft Lauderdale, FL 33316**TITLE **P.T.D.** ☒ Change ☐ Addition
NAME **Fitzpatrick, Michael J.**
STREET ADDRESS **2111 NE 31 Street**
CITY-ST-ZIP **Light House Point, FL 33064**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael J. Fitzpatrick**1/28/01**

Date

954-894-2348

Daytime Phone #

CR2E034 (10/00)