2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P97000070169** May 16, 2000 8:00 am Secretary of State SCREAMIN MULLET CHARTERS AND OUTFITTERS, INC. 05-16-2000 90083 045 ***150.00 Principal Place of Business Mailing Address 1070 EAST INDIANTOWN ROAD STE. 400 1070 EAST INDIANTOWN ROAD STE. 400 JUPITER FL 33477 JUPITER FL 33477-5144 rcipal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0774338 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KEMPE, JOSEPH C Street 1070 EAST INDIANTOWN ROAD STE. 400 JUPITER FL 33477 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE TITLE ☐ Delete KEMPE, JOSEPH C NAME NAME STREET ADDRESS 1070 EAST INDIANTOWN ROAD STE. 400 STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477 CITY-ST-7IP ☐ Addition TITLE Change TITLE FORD, DANIEL I NAME 19741 SE COUNTY LINE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **TEQUESTA FL 33469** CITY-ST-ZIP **VPST** Delete TITLE TITLE KEMPE, TAMI G. NAME NAME 1070 E. INDIANTOWN RD, SUITE 400 STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and acturate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to expect this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the information supplied with this file indicated on this report or supplemental report is true a of the corporation or the receiver or trustee empowers

empowered.

changed, or on an attachment with an address, with

SIGNATURE AND TYPED OR PRINTED NAMI

SIGNATURE: