2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # P97000079414 May 09, 2000 8:00 am 1. Entity Name PREDATOR YACHTS, INC. < Secretary of State 05-09-2000 90114 034 ***150.00 Mailing Address Principal Place of Business PO BOX 728 P.O. BOX 728 SARASOTA FL 34230-0728 SARASOTA FL 34230 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FE! Number City & State 65-0804655 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCURDY, JEFFREY 2 N TAMIAMI TR **STE 410** SARASOTA FL 34236 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 (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. →Trust Fund Contribution. Make Check Payable to Department of State (See_criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PTD Change TITLE Addition TITLE ☐ Delete GRIFFIN, WILLIAM D NAME NAME 2 N TAMIAMI TR STE 410 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP Addition □ Delete TITLE TITLE MCCURDY, JEFFREY R NAME NAME 2 N TAMIAMI TR STE 410 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 Addition ☐ Change ☐ Delete TITLE TITLE KICHARD A. HALLOY NAME STREET ADDRESS STREET ADDRESS 2060 SIST CITY-ST-ZIP CITY-ST-ZIP SARASOTA. **Addition** Change □ Delete TITLE TITLE RANDY D. SALSER NAME NAME 2060 51st st STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA CITY-ST-ZIP ☐ Change ☐ Addition TITI F TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 II. . 19 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; Landau appears in Block 11 or Block 12 in the corporation of the receiver of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; Landau appears in Block 11 or Block 12 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; Landau appears in Block 11 or Block 12 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; Landau appears in Block 11 or Block 12 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; Landau appears in Block 12 in the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; Landau appears in Block 12 in the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. e appears in Block 11 or Block 12 if