

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 17, 2002 8:00 am**  
**Secretary of State**

09-17-2002 90097 021 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P97000094794**

1. Entity Name  
**MARINA DEVELOPERS OF WEST FLORIDA, INC.**

Principal Place of Business  
**4 LAGUNA STREET**  
**SUITE 201**  
**FORT WALTON BEACH FL 32548**  
**US**

Mailing Address  
**P.O. BOX 12063**  
**PENSACOLA FL 32590**  
**US**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **59-3477948**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SCHWEIZER, TODD**  
**4 LAGUNA STREET**  
**SUITE 201**  
**FORT WALTON BEACH FL 32548**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	DVP	<input type="checkbox"/> Delete
NAME	SCHWEIZER, TODD	
STREET ADDRESS	804 S PALAFOX ST	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	JOVIENU, MIKE	
STREET ADDRESS	4 LAGUNA STREET, SUITE 201	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jovieno, Mike	
STREET ADDRESS	4 Laguna Street, Suite 201	
CITY-ST-ZIP	Fort Walton Beach, FL 32548	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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**

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (4/02)

*Attachment*

*678179*

*# PG 70006941794*

**Todd Schweizer**

4 Laguna Street, Suite 201  
Fort Walton Beach, FL 32548  
(850) 301-0179  
(850) 301-0182 Fax

September 12, 2002

Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

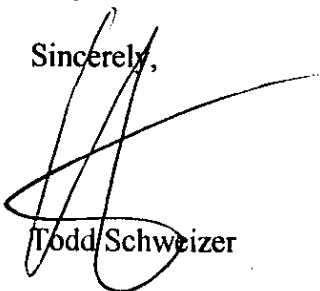
To Whom it May Concern,

I am submitting this letter as written notice that my office never received the notice of annual business report on the following Corporations:

Coyote Land Co., Inc.  
Marina Developers of West Florida, Inc.  
2 Dakota, Inc.  
Trinity Investments of Northwest Florida, Inc.  
241 Development Limited Partnership

Since previous notices were not received by my office, I am submitting the regular filing fee for each Corporation in the amount of \$150.00 each for reinstatement of these corporations. Please advise the addresses you have on record for the above corporations.

Sincerely,



Todd Schweizer