

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90053 009 ***150.00

DOCUMENT # **P97000096321**

1. Entity Name
THREE G'S SPORT FISHING INC.



DO NOT WRITE IN THIS SPACE

90133792

2. Principal Place of Business
332 Crosswinds DR

Suite, Apt. #, etc.

3. Mailing Address
332 Crosswinds DR

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PAUM HARBOR, FL

City & State

4. FEI Number
59-3477754

Applied For
Not Applicable

Zip
34683

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
William L. Vinson

Street Address (P.O. Box Number is Not Acceptable)

110 S. Lewis Ave.

City **TARPOON SPRINGS** FL Zip Code **34689**

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ALBERT A. GRIFFITHS
(PRESIDENT)
332 Crosswinds DR
PAUM HARBOR, FL 34683**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 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 #

5-5-03 7279340403

CR2E034B (12/02)

Attachment



90133792

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 29, 2003

THREE G'S SPORT FISHING, INC.
332 CROSSWINDS DRIVE
PALM HARBOR, FL 34683

SUBJECT: THREE G'S SPORT FISHING, INC.
Ref. Number: P97000096321

Upon receipt of your letter and/or check(s) totaling \$150.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited. Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 203A00025923