

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000098660

1. Entity Name

NAPLES CRUISE LINES, INC.

FILED

Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90237 041 ***150.00

Principal Place of Business

OLD NAPLES SOUTH
1001 TENTH AVE SOUTH SUITE 211
NAPLES FL 34102

Mailing Address

55 WEST STREET
BAR HARBOR ME 04609
US

2. Principal Place of Business

3. Mailing Address

140 GOOSE COVE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
TRENTON ME

4. FEI Number 59-3478412

Applied For

Not Applicable

Zip

Country

Zip

Country

04605

US

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME CREAMER, JUNE
STREET ADDRESS RR 1 BOX 230 CC
CITY-ST-ZIP ELLSWORTH ME 04605 ☐ Delete

TITLE PD
NAME JUNG CREAMER
STREET ADDRESS 140 GOOSE COVE RD
CITY-ST-ZIP TRENTON ME 04605 ☒ Change ☐ Addition

TITLE TD
NAME CREAMER, LORENZO JR
STREET ADDRESS 7715 24TH AVE., WEST
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CREAMER, LESLIE
STREET ADDRESS 49 NEST ST
CITY-ST-ZIP BAR HARBOR ME 04609 ☐ Delete

TITLE D
NAME LESLIE CREAMER
STREET ADDRESS 14 NEWTON WAY
CITY-ST-ZIP BAR HARBOR ME 04609 ☒ Change ☐ Addition

TITLE D
NAME DYER, CATHY
STREET ADDRESS 5226 HEMINGWAY CIRCLE APT-2001
CITY-ST-ZIP NAPLES FL 34116 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

JUNE C CREAMER JUNG CREAMER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/01 (201)667-4350

Date

Daytime Phone #

CR2E034 (10/00)