

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000101795**

1. Entity Name

BRADY & ASSOCIATES YACHT SALES, INC.**FILED****Jan 29, 2001 8:00 am**
Secretary of State

01-29-2001 90051 024 ***150.00

Principal Place of Business

**2030 WEST FIRST STREET
SUITE E
FORT MYERS FL 33901**

Mailing Address

**2030 WEST FIRST STREET
SUITE E
FORT MYERS FL 33901****705727**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0799889**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SNYDER, DONALD E
181 IBIS STREET
FORT MYERS BEACH FL 33931**

Name

John E. Brady

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

12431 McGregor Blvd.

City

Ft. Myers

FL

Zip Code

33919

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

John E. Brady Pres.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-19-20019. 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 **D** ☐ Delete
NAME **BRADY, JOHN E**
STREET ADDRESS **12431 MCGREGOR BOULEVARD**
CITY-ST-ZIP **FORT MYERS FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **D** ☒ Delete
NAME **SNYDER, DONALD E**
STREET ADDRESS **181 IBIS STREET**
CITY-ST-ZIP **FORT MYERS BEACH FL 33931**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Change ☐ 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:

John E. Brady **John E. Brady**

Date

1-19-2001 941-461-9591

Daytime Phone #

CR2E034 (10/00)