

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000000465

1. Entity Name

BLACK MARLIN INVESTMENTS, INC.

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90308 036 \*\*\*150.00

Principal Place of Business

759 S FEDERAL HWY STE 217  
STUART FL 34994

Mailing Address

759 S FEDERAL HWY STE 217  
STUART FL 34994

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0806383

Applied For

Not Applicable

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

GLASRU, THEODORE G  
3354 SE FAIRWAY EAST  
STUART FL 34997

Name

see attached statement  
of change

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 ☐ Delete  
NAME P  
STREET ADDRESS GLASRU, THEODORE G  
CITY-ST-ZIP 3354 SE FAIRWAY EAST  
STUART FL 34997

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

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS KUEHN, PAUL  
CITY-ST-ZIP 1801 RICE CREEK ROAD  
NEW BRIGHTON MN 55112

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

TITLE ☐ Delete  
NAME ST  
STREET ADDRESS POHL, GERRY  
CITY-ST-ZIP 3317 EDWARD ST., NE  
MINNEAPOLIS MN 55418

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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, and all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/13/01

(612) 341-2651

CR2E034 (10/00)

Doc. # P98000000465

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

746565

Pursuant to the provisions of sections 607.0502, 617.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida:

1. The name of the corporation: Black Marlin Investments, Inc.

2. The mailing address of the corporation: 759 S. Federal Highway, Suite 217, Stuart, FL 34994

3. Date of incorporation/qualification: 01/02/1998 Document number: P98000000465

4. The name and address of the current registered agent and office:

Theodore G. Glasrud

3354 S.E. Fairway East

Stuart, FL 34997

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P.O. Box Not Acceptable)

Theodore G. Glasrud

759 S. Federal Highway, Suite 217

Stuart, FL 34994

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

  
(Signature of an officer, chairman or vice chairman of the board)

1-1-01  
(Date)

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

  
(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314

FILED  
01 JAN 16 AM 11:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
(Capacity)

P98000000465

Requester's Name 759 S Fed Hwy, Apt 217	
Address Stuart, FL 34994	
City/State/Zip	Phone #

Doc. #  
P98000000465  
746565

Office Use Only

## CORPORATION NAME(S) &amp; DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

300003538209--3  
-01/16/01--01083--001  
\*\*\*\*\*140.00 \*\*\*\*\*35.00

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☒ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JAN 16 AM 11:44

FILED

Examiner's Initials

AL-1901