

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000017652

1. Entity Name

FLORIDA BOAT SURVEYING INC.

FILED

May 08, 2000 8:00 am
Secretary of State

05-08-2000 90130 008 ***150.00

Principal Place of Business

2659 PEAK STREET
PALM HARBOR FL 34683

Mailing Address

2659 PEAK STREET
PALM HARBOR FL 34683-3151

2. Principal Place of Business

3312 Pineview Dr.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 3482

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Holiday, FL

City & State

Holiday, FL

4. FEI Number

59-3496217

Applied For

Not Applicable

Zip

34691

Country

USA

Zip

34690

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ST MARTIN, THERESA
2659 PEAK STREET
PALM HARBOR FL 34683

7. Name and Address of New Registered Agent

Name

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

3312 Pineview Dr.

City Holiday

FL

Zip 34691

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

Theresa A. Martin Theresa A. Martin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/24/2000

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, 2000 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

TITLE D ☐ Delete
NAME ST. MARTIN, THERESA
STREET ADDRESS 2659 PEAK STREET
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3312 Pineview Dr.
CITY-ST-ZIP Holiday, FL 34691

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

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

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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, with all other like empowered.

SIGNATURE:

Theresa A. Martin Theresa A. Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/24/2000

Daytime Phone #

727-939-2733