

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003 8:00 am
Secretary of State

05-23-2003 90142 046 ***150.00

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DOCUMENT # P98000074673

1. Entity Name
TIMBER FRIEDMAN'S MARINE WILDLIFE GALLERY, INC.



Principal Place of Business
**291 FRONT STREET, STE 8
KEY WEST FL 33040**

Mailing Address
**291 FRONT STREET, STE 8
KEY WEST FL 33040**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0859726**

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

**FRIEDMAN, TIMBER
291 FRONT STREET, STE 8
KEY WEST FL 33040**

Name
Tamara L. Cochran
Street Address (P.O. Box Number is Not Acceptable)
291 Front Street, Suite 8
City
Key West FL Zip Code
33040

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 **Tamara L. Cochran**
Signature, typed or printed name of registered agent and title if applicable.

April 30, 2003
DATE

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTSD
FRIEDMAN, TIMBER
291 FRONT STREET, STE 8
KEY WEST FL 33040** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES.
Matthew H. Cochran
1584 Gardenia Lane
Big Pine Key, FL 33043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
FRIEDMAN, GARY
291 FRONT STREET, STE 8
KEY WEST FL 33040** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Tamara L. Cochran
1584 Gardenia Lane
Big Pine Key, FL 33043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ Delete

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Tamara L. Cochran**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 30, 2003 **305-296-4259**
Date Daytime Phone #

CR2E034 (10/02)