

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000002305

1. Entity Name  
MARINE TRANSPORTATION, INC.

R

**FILED**  
**Jul 21, 2000 8:00 am**  
**Secretary of State**

07-21-2000 90160 028 \*\*\*150.00

Principal Place of Business  
407 TRADEWINDS DR.  
INDIAN HARBOR BEACH FL 32937

Mailing Address  
407 TRADEWINDS DR.  
INDIAN HARBOR BEACH FL 32937

2. Principal Place of Business

3. Mailing Address  
PO Box 372355

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
Satellite Beach

4. FEI Number  
06-1308511

Applied For  
Not Applicable

Zip Country  
FL 32837 Brevard

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

OLSON, DONALD C  
407 TRADEWINDS DR.  
INDIAN HARBOR BEACH FL 32937

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	OLSON, DONALD C		NAME		
STREET ADDRESS	407 TRADEWINDS DR.		STREET ADDRESS		
CITY-ST-ZIP	INDIAN HARBOR BEACH FL 32937		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: SIGNATURE OF DONALD C OLSON PRES 7/17/00 321 779 9942  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

P99000002305

A0069245

Marine Transportation, Inc  
P O Box 372355  
Satellite Beach, FL 32837

July 17, 2000

Division of Corporations  
Uniform Business Report Filings  
P O Box 6327  
Tallahassee, FL 32314

RE: Document #P99000002305

We are in receipt of the above document. Please be advised that we have just received this document for the first time. We were told that the initial document for filing was mailed on or about February 2000 and did not reach us due to in improper address.

We are enclosing the amount of \$150.00 as filing fee and feel that we should not be held responsible for the late fee of \$450.00. This is our first time filing the UBR form and can only assume that any other form was mailed to the incorrect address.

Thank you for your consideration in the matter.

Very truly yours,



Donald C Olson *president*  
Marine Transportation Inc