

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90028 013 ***150.00

DOCUMENT # P99000045899

1. Entity Name
SEAGREEN MARINE, INC.

Principal Place of Business

4761 GULF BREEZE PKWY
GULF BREEZE FL 32561

Mailing Address

4753 CHINQUAPIN DRIVE
GULF BREEZE FL 32561-9235

4761 GULF BREEZE PKWY.
GULF BREEZE, FL 32563

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number 59-3580179

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

GREEN, CHRIS R SR.
4753 CHINQUAPIN DRIVE
GULF BREEZE FL 32561-9235

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

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 \$650.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
GREEN, CHRIS R SR
4753 CHINQUAPIN DRIVE
GULF BREEZE FL 32561-9235

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

7-19-2001 TALKED
I DID NOT RECEIVE
PLEASE

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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 reports 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-19-01 (850) 916-2628

CR2E034 (5/01)

Attachment
Doc# 99900005899
COO74088



"There is no right price for the wrong boat!!"

7-19-01

FLORIDA Dept. OF STATE
DIVISION OF CORPORATIONS
UNIFORM BUS. REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

DEAR MARIE:

THIS IS THE LETTER YOU REQUESTED
I WRITE YOUR OFFICE TO VERIFY
THE FACT I DID NOT RECEIVE MY
1ST NOTICE OF THE UBR.
I'VE UPDATED THE MAILING ADDRESS
TO THE ACTUAL BUSINESS LOCATION.

ENCLOSED IS THE UBR FORM AND
MY CHECK FOR THE \$150.00 FEE.

I APPRECIATE YOUR HELP!

Blair R. Green,
PRESIDENT
SEAGREEN MARINE, INC.
PH. (850) 916-2628

