2002 UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # P99000050439 1. Entity Name 01-30-2002 90124 039 ***150 00 SUN HARBOR MARINA OF PANAMA CITY, INC. Principal Place of Business Anding Address 12000 SUNHARBOR MARINA SUNHARROR MARINA 5505 SUNHARBOR ROAD 5505 SUNHARBOR ROAD PANAMA CITY FL 32401 PANAMA CITY FL 32401 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 Applied For 59-3579715 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FLEMING GEORGE R Street Address (P.O. Box Number is Not Acceptable) 5505 SUN HARBOR ROAD PANAMA CITY FL 32401 City Zio 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (9/01) TITLE M Addition TITLE **X** Delete NAME FLEMING MAX NAME PO BOX 9875 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH PA 32417 CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME Vice President FLEMING, GEORGE R NAME STREET ADDRESS PO BOX 9875 STREET ADORESS CITY-ST-7IP PANAMA CITY BEACH PA 32417 CITY-ST-ZIP ☐ Defete TITLE TITLE: ☐ Change ☐ Addition NAME NAME SYFRETT, TROY F JR. Secretary STREET ADDRESS STREET ADDRESS PO BOX 9875 T. Frank Syfrett, Presper Handillon P.O. Box 9875 CITY-51-ZIP PANAMA CITY BEACH PA 32417 CITY-ST-7IP TITLE Delete TITLE FLEMING, MAX NAMÉ NAME STREET ADDRESS PO BOX 9875 STREET ADDRESS Panama City Beach, 32417 CITY-ST-ZIA CITY - ST- ZIP PAÑAMA CITY BÉACH PA 32417 ☐ Delete TITLE ☐ Chance ☐ Addition NAME SYFRETT, JAMES E NAME STREET ADDRESS PO BOX 9875 STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP PANAMA CITY BEACH PA 32417 TITLE ☐ Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/2 CITY-ST-ZIP 13. Theraby 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 impowered to execute this report to required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if

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