

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90021 049 ***150.00

DOCUMENT # P99000053377

1. Entity Name

WHITECAPS WATERSPORTS, INC.

Principal Place of Business

**624 NORTH O STREET
LAKE WORTH FL 33460**

Mailing Address

**624 NORTH O STREET
LAKE WORTH FL 33460**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0928155

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****MODERWELL, CHRISTOPHER
624 NORTH O STREET
LAKE WORTH FL 33460****7. Name and Address of New Registered Agent**

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

Christopher Moderwell

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-17-019. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-------------------------------|---------------------------|----------------------------|---------------------------------|
| | D | | | |
| | MODERWELL, CHRISTOPHER | 624 NORTH O STREET | LAKE WORTH FL 33460 | |
| | D | | | |
| | GEISLER, GARY | 624 NORTH O STREET | LAKE WORTH FL 33460 | |
| | D | | | |
| | ENGEL, MICHAEL | 624 NORTH O STREET | LAKE WORTH FL 33460 | |
| | | | | |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|------|----------------|-------------|---------------------------------|-----------------------------------|
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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:

Christopher Moderwell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

01-17-01

Daytime Phone #

(561) 540-4400

CR2E034 (10/00)

0317-3