

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080528

1. Entity Name

YACHT TITLE INSURANCE, INC.

Principal Place of Business

1600 SE 17TH ST. CAUSEWAY, STE. 405  
FT. LAUDERDALE FL 33316

Mailing Address

1600 SE 17TH ST. CAUSEWAY, STE. 405  
FT. LAUDERDALE FL 33316

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

EDWARDS, ROBERT R  
1600 SE 17TH ST. CAUSEWAY, STE. 405  
FT. LAUDERDALE FL 33316

7. Name and Address of New Registered Agent

Name **Kurt E. Bosshardt**

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

TITLE **D** ☐ Delete  
NAME **BOSSHARDT, KURT E**  
STREET ADDRESS **1600 SE 17TH ST. CAUSEWAY, STE. 405**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **D** ☒ Delete  
NAME **EDWARDS, ROBERT R**  
STREET ADDRESS **1600 SE 17TH ST. CAUSEWAY, STE. 405**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **D** ☒ Delete  
NAME **MORRIS, REGINALD P JR.**  
STREET ADDRESS **1600 SE 17TH ST. CAUSEWAY, STE. 405**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **D** ☒ Delete  
NAME **CARLAND, J. PAUL II**  
STREET ADDRESS **1600 SE 17TH ST. CAUSEWAY, STE. 405**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE **D** ☒ Delete  
NAME **MESMER, DONNA**  
STREET ADDRESS **1600 SE 17TH ST. CAUSEWAY, STE. 405**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01

954 264-7772

Date

Daytime Phone #

**FILED**  
**Apr 11, 2001 8:00 am**  
**Secretary of State**  
04-11-2001 90068 014 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

0260767

CR2E034 (10/00)