

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 15, 2004 8:00 am**  
**Secretary of State**

03-15-2004 90007 035 \*\*\*150.00

DOCUMENT # P 99000100340

1. Entity Name

WATERVIEW BOAT ASSOC. INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

200 GULF SHORE DR

Suite, Apt. #, etc.

3. Mailing Address

662 Highway 98E

Suite, Apt. #, etc.

# 750

**54018117**

DO NOT WRITE IN THIS SPACE

City & State

DESTIN, FL

City & State

DESTIN, FL

4. FEI Number

59-3652288

Applied For

Not Applicable

Zip

32541

Country

OKANOSA

Zip

32541

Country

OKANOSA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

MACLIN, HENRY W. JR

Street Address (P.O. Box Number is Not Acceptable)

662 Highway 98E # 750

City

DESTIN

FL

Zip Code

32541

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DDP MACLIN, HENRY W. JR 662 Highway 98E, # 750 DESTIN, FL 32541	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ELLIOTT, GEO. B. 200 GULF SHORE DR DESTIN, FL 32541	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOWELL, B. SCOTT 110 GULF SHORE DR. DESTIN, FL 32541	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Henry W. Maclin Jr* PRES.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/04 850-654-9304  
Date Daytime Phone #

CR2E034B (12/02)