

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

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91565 047 ***150.00

DOCUMENT # **P99000108707** ✓

1. Entity Name

Aqua Marine of Florida, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5040 110th Avenue North

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Clearwater FL

City & State

Zip

34620

Country

USA

Zip

Country

4. FEI Number

59-3628235

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Inglis, John S

Street Address (R.D. Box Number is Not Acceptable)

City

101 Kennedy Blvd. STE 2800

City

Tampa

FL

Zip Code

33602

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
Pettisani, Joanne
5040 110th Ave. N.
Clearwater, FL 34620**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
Cowan, James
5040 110th Ave. N.
Clearwater, FL 34620**

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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)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Joanne C. Pettisani

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02

Date

727-572-6941

Daytime Phone #

CR2E034B (12/01)