

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S83282

1. Entity Name

MARINE TECH SERVICES, INC.

**FILED**  
**Jan 20, 2000 8:00 am**  
**Secretary of State**

01-20-2000 90209 003 \*\*\*150.00

Principal Place of Business

1556 CYPRESS DR  
SUITE 27  
JUPITER FL 33469  
US

Mailing Address

1556 CYPRESS DR  
SUITE 27  
JUPITER FL 33469-3138  
US

2. Principal Place of Business

150 Toney Penna Drive

3. Mailing Address

150 Toney Penna Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite B

Suite B

City & State

City & State

Jupiter, FL

Jupiter, FL

Zip

Country

Zip

Country

33458

USA

33458

USA

6. Name and Address of Current Registered Agent

MCKEE, CRAIG D  
1556 CYPRESS DR  
JUPITER FL 33469

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

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, 2000 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 PS  
NAME MCKEE, CRAIG D  
STREET ADDRESS 953 TOWNHALL DRIVE  
CITY-ST-ZIP JUPITER FL ☐ Delete

TITLE VPT  
NAME ADAMEK, DENNIS J  
STREET ADDRESS 18430 SE LAKESIDE DRIVE  
CITY-ST-ZIP TEQUESTA FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME Jourdin, Adlai  
STREET ADDRESS 8116-A Severn Drive  
CITY-ST-ZIP Boca Raton, FL. 33433 ☐ Change ☒ Addition

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

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

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

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

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

Date

Daytime Phone #

(561) 743-8400

CR2E034 (9/99)