YACHT AND SHIP BROKER'S

COMPLAINT FORM

BELOW.	=======	=========	=========	======
DATE:				
		COMPLAINANT		
NAME:				
NAME:First		Middle		Last
ADDRESS:				
Str	eet	City	State	Zip
<u>PHONE</u> :()		(day time)	
		RESPONDENT		
NAME:				
Perso	n	and/or	Company	
ADDRESS:				
	eet	City	State	Zip
PHONE: ()				
SUBJECT OF COMP	LAINT: (Vi	lolation)		
	1			
Has the respond complaint? Yes No	ent been r	otified of th	e issues in this	

If yes, what was the method of notification?

_	retained Legal laint? Yes	Counsel rega	rding the issues listed in
Name of	Counsel	Street	and/or Mailing Address
City	State	Zip	() Telephone Number
ATTACH A	action been fi COPY OF EACH CO T COURT PLEADIN =========	MPLAINT FILE	No IF SO, D IN COURT AND ANY

NOTE: A copy of this complaint may be sent to the Respondent.

BRIEF DESCRIPTION: (Narrative) Explain the nature of your complaint. Please type or write legibly. Give facts, details, dates and full names of all persons and witnesses involved. If more space is needed, please attach a separate sheet. ATTACH COPIES OF ALL DOCUMENTS, BILLS, RECORDS, CORRESPONDENCE, CONTRACTS, ETC., WHICH SERVE TO SUPPORT YOUR ALLEGATIONS.

What action do you expect the Divis	sion to take?				
I hereby request the Division of Fineshares, and Mobile Homes, Burea to make appropriate investigation alleged. I understand that the Division complaint pursuant to the provision Statutes.	au of Compliance, nto the violation herein vision may investigate this				
Florida Statutes 837.06, False Official Statements: Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.					
S:	gnature of Complainant				
Da	ate				

BUREAU OF COMPLIANCE
DIVISION OF FLORIDA CONDOMINIUMS, TIMESHARES, AND MOBILE HOMES
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
2601 Blair Stone Road
Tallahassee, FL 32399-1030