## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scorelary of State

DIVISION OF CORPORATIONS

DOCUMENT # 351856

(0)

1. Corporation Name

IMPERIAL YACHT SALES, INC.

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Principal Place of Business 205 S. HOOVER STREET TAMPA FL 33609

2. Principal Place of Business

**TAMPA FL 33609** 

Suite, Apt. #, etc.

City & State

21

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23

24

Zip

205 S. HOOVER STREET

2a. Mailing Address

City & State

Ζip

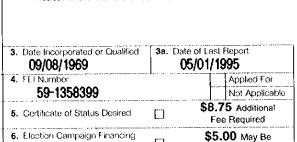
Suite, Apt. #, etc.

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205 S. HOOVER STREET TAMPA FL 33609



Added to Fees

8. This corporation has liability or intangible tax under s. 199.032, Florida Statutes Yes No.

10. Name and Address of New Registered Agent.

	9. Name and	l Address of	Current Re	gistered A	gent	
HUGHEY,	,MIKE OOVER ST					

Country

25

81	Name	Tam. 1.0 1.0 1	
82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	85	Zip Code

Trust Fund Contribution

11. Pursuant to the provisions of Sections 607.0502 and £07.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Florida Statutes.

Country

30

12.	OFFICERS AND DIREC	TORS	13.	ADDITI	ONS/CHANGES TO C	PENCERS AND DIRECTO	
TITLE	VD	DELETE	1. 1 TITLE	V D		Change	Add tion
NAME	HURST, H E		1.2 NAME	FARMER	T.D.	ا ساد دارسه	
STREET ADDRESS	205 S HOOVER ST		1.3 STREET ADDRESS	265 S.	T.D. HOOVER S F1 3360	r + · ·	
CITY-ST-ZIP	TAMPA FL		1.4 C/TY - ST - Z/P	TAMPA	F1 3360	9	
TITLE	PD	☐ DETEJE	2 1 1151.6	•		☐ Change	☐ Addition
NAME	HUGHEY, MIKE		2.2 NAME				
STREET ADDRESS	205 S HOOVER ST		2 3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		2.4 CITY · S1 · ZIP				
TITLE	SD	DELETE	3.1 TITLE			☐ Change	Addition
NAME	CARTER, SHIRLEY H		3 2 NAME				
STREET ADDRESS	205 S HOOVER ST		3.3. STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		3 4 CITY - ST - 7IP	,			
TITLE	1	□ DELETE	4. 1 TITLE			Change	Addition
NAME	RAWLINS, WANITA M		4.2 NAME				
STREET ADDRESS	205 S. HOOVER ST.		4.3 STREET ADDRESS				
CITY - ST- ZIP	TAMPA FL		4.4 CITY - ST - ZIP		L		F-1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<b>1</b> 11LE	ASD	DELETE	5. 1 TITLE	V AS J	D	Change	Addition
NAME	BROWNE, DAN		5.2 NAME				
STREET ADDRESS	205 S. HOOVER ST		5.3 STREET ADDRESS				
CITY-ST-7IP	TAMPA FL		5.4 CITY- ST-ZIP				
TRUE	1	DELFTE	6 1 TITLE			Cnange	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS	1			
CITY . CT . 71D			6.4 CITY-ST-ZIP				

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or injector 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 12 or Block 13. Changed, or gh an attachment with an address.

SIGNATURE:

Manure and types or printed name of signing officer or director

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