

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H23788 (3)

1. Corporation Name
FLORIDA BUOYS, INC.

Principal Place of Business

Mailing Address

**3900 OVERSEAS HWY.
MARATHON FL 33050
US**

**P.O. BOX 501082
MARATHON FL 33050-1082
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/03/1984

3a. Date of Last Report

05/24/1994

4. FBI Number

59-2449919

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MAYETTE, JERRY
3900 OVERSEAS HWY.
PO BOX 1082
MARATHON FL 33050**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	MAYETTE, JERRY
STREET ADDRESS	1 CLARA BLVD.
CITY, ST, ZIP	KEY COLONY BEACH FL 33051
TITLE	V
NAME	MAYETTE, CLARA A
STREET ADDRESS	1 CLARA BLVD.
CITY, ST, ZIP	KEY COLONY BEACH FL 33051
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	MAYETTE, JERRY	
1.3 STREET ADDRESS	1129 CALLE ENSENADA	
1.4 CITY, ST, ZIP	MARATHON, FLA. 33050	
2.1 TITLE	V	☒ Change ☐ Addition
2.2 NAME	MAYETTE, CLARA A.	
2.3 STREET ADDRESS	1129 CALLE ENSENADA	
2.4 CITY, ST, ZIP	MARATHON, FLA. 33050	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Clara A Mayette

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

4/28/95

305-743-6851