FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **K66361** **(2)**

1. Corporation Name
BURNS BOAT REPAIR, INC.

Principal Place of Business
2036 MILLS LANE
NAPLES FL 33962
US

Mailing Address
2036 MILLS LANE
NAPLES FL 33962
US

3. Date Incorporated or Qualified: 02/06/1989
3a. Date of Last Report: 04/27/1995
4. FEI Number: 65-0096983 — [ ] 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. The corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 25 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 30 Country

9. Name and Address of Current Registered Agent

BURNS, WILLIAM
2036 MILLS LANE
NAPLES FL 33962

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 ... 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. ... I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of ... Florida Statutes.

SIGNATURE DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	BURNS, WILLIAM C	
STREET ADDRESS	2036 MILLS LANE	
CITY-ST-ZIP	NAPLES FL	
TITLE	TD	[ ] DELETE
NAME	BURNS, SYLVIA L.	
STREET ADDRESS	2036 MILLS LANE	
CITY-ST-ZIP	NAPLES FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Addition (×6)

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Burns — March 28 '96 — 941-775-4020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR