## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

BURNS BOAT REPAIR, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K66361

(2)

## **FILED** May 15 1997 8:00am Secretary of State

2. Friendhalf Pisce of Husiness 21 2.0 3.6 Milling Address 22 25 7.0 3.6 Mills   April 1. Fell Humbs   Appiled   App	Principal Place of Business Mailing Address 2036 MILLS LANE 2036 MILLS LANE NAPLES FL 33962 NAPLES FL 34112-0652 US					E TERRORI BUT BUTTO TARAD ATRIA DIRECTIVAT BURTU DADA BUDTA BUDTA BUDTA BUDTA BUDTA		
21 O 3 C M: \  S   Down   25   Sulfo, Apt #, etc.						3. Date Incorporated or Qualified 02/06/1989	3a. Date of Last Report 04/03/1996	
Sule. Apt. #, etc.    Sule. Apt. #, etc.   Sule. Ap		•		ills	lane		Applied For Not Applicable	
City & State   Country   Country   Zip   Z	Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Country   Coun	City & Stat		City & State	Fla		, , ,	\$5.00 May Be Added to Fees	
BURNS, WILLIAM 2036 MILLS LANE NAPLES FL 33862  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 reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of February Such changing its reg office of registered agent, or both, in the State of Pebruary Such change its reg office of registered agent, or both, in the State of Pebruary Such changing its reg of regert. I am fortier the change in	Zip	Country 125 USA	29 34\1 2 3			Florida Statutes	Yes No	
2036 MILLS LANE NAPLES FL 33962  82 Sireet Address (P.O. Box Number is Not Acceptable)  83   84 City   FL   85   Zip Code  85   Zip Code  86   Zife City   FL   86   Zip Code  87   City   FL   87   Zip Code  88   Zip Code  89   Zip Code  80   Zip Code  80   Zip Code  81   Zip Code  81   Zip Code  81   Zip Code  82   Zip Code  83   Zip Code  84 City   FL   85   Zip Code  85   Zip Code  85   Zip Code  86   Zip Code  87   Zip Code  88   Zip Code  88   Zip Code  89   Zip Code  89   Zip Code  89   Zip Code  89   Zip Code  80   Zip Code  80   Zip Code  80   Zip Code  80   Zip Code  81   Zip Code  80   Zip	RIIR		t negistered Agent	81	Name	10. Name and Address of New Neg	haraten wäettr	
NAPLES FL 33962  11. Pursuant to the provisions of Soctions 607 0502 and 607.1508, Florida Statutes, the opporation submits this statement for the provisions of Soctions 607 0502 and 607.1508, Florida Statutes, the opporation's board of directors. I hereby accept the appointment as replication aggent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signator: year or princed many or representative or required agent and the herefolder.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DIRECTORS IN DIRECTORS IN THE STATE ADDRESS.  SIGNATURE  BURNS, WILLIAM C  12 NAME  BURNS, WILLIAM C  12 NAME  13 STREET ADDRESS  CHY-ST-ZP  TO  DELETE  14 CHY-ST-ZP  TO  DELETE  22 TIME  14 CHY-ST-ZP  TO  DELETE  22 TIME  22 NAME  23 STREET ADDRESS  CHY-ST-ZP  TO  DELETE  33 TIME  24 CHY-ST-ZP  TO  DELETE  31 TIME  Change	1	•		62	Stroot As	(drees (B.O. Boy Number is Not Acceptable	n1	
### City ### FL B\$ Zip Code  11. Pursuant to the priorisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its region of control of the priorision of the purpose of changing its region of control of the purpose of changing its region of control of the purpose of changing its region of control of the purpose of changing its region of control of the purpose of changing its region of control of the purpose of changing its region of directors. Therefore appointment as region of control of the purpose of changing its region of directors. Therefore appointment as region of directors. Therefore appointment as region of the corporation of the purpose of changing its region of directors. Therefore appointment as region of directors. Therefore appointment as region of the corporation of the purpose of changing its region of directors. Therefore appointment as region of the corporation of the purpose of changing its region of directors. Therefore appointment as region of directors. Therefore appointment as region of directors. Therefore appointment as region of the corporation submits this statement for the purpose of changing its region of directors. Therefore appointment as region as a purpose of directors. Therefore appointment as region appointment as region appointment as regions.  12.				62	Street Ad	Joress (F.O. DOX Number is Not Acceptable	θ;	
11. For such to the processors of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registeric 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 registeric agent, and accept the obligations of Section 607 0505, Florida Statutes.    SIGNATURE				83				
11. FUSION TO THE Provision of Sections 607 0502 and 607 1509. Florida Statutes, the above-named corporation submite this statement for the purpose of changing its registered agent, 1 and hardlick with, and accept the obligations of Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  III.F  PD  OFFICERS AND DIRECTORS  III.F  PD  DELETE  1.1 TITLE  DELETE  1.2 TITLE  DELETE  1.3 SIRRET ADDRESS  DIV. S1-72P  DIV. S1-72P  DELETE  3. SIRRET ADDRESS  CITY. S1-72P  DELETE  5. SIRRET ADDRESS  CITY. S1-72P				84	City		85 Zip Code	
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 register agent and familiar with, and accept the obligations of, Section 607, 5055, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DIR	44 71	and the same of Contage (O7 000	2 and COZ 1500 Florida Statuta	1 the shau	2 Barrad a	proceeding submits this statement for the pr		
12.	office or i	registered agent, or both, in the State	of Florida, Such change was au	thorized by	the corpor	ration's board of directors. I hereby accep	t the appointment as registered	
12.		im familiar with, and accept the obliga	2 (1	_	ē.	1 no	rp' ac d:	
DELETE	SIGNATURE	Signature: Typino or printed name of registered age			ani signalure re-	quired when reinstating)	DAYE	
NAME   STREET ADDRESS   CHY-ST-ZP   COS MILLS LANE   LANE   LA CTY-ST-ZP   COS MILLS LANE   LA CTY-ST-ZP   L						ADDITIONS/CHANGES TO OFFIC		
13 STREET ADDRESS		1 * *	L DELETE	1	. }		Change Additio	
NAPLES FL					I ADDRESS			
D				1	1			
NAME   SURE   ADDRESS   2036 MILLS LANE   2.3 STREET ADDRESS   2.4 CITY - ST - ZIP		<b>\</b>	DELETE		1-21		Change Addition	
CHY-SLZIF		BURNS, SYLVIA L.		2.2 NAME				
DELETE   DELETE   3.1 TITLE   Change   DELETE   3.2 NAME	STREET ALORESS			2.3 STREET	ADDRESS			
AAME	CITY ST ZIF	NAPLES FL		2. 4 CITY -	ST-ZIP			
STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP	TITEE		DELETE	3.1 FITLE			☐ Change ☐ Addition	
CITY - ST - ZIP	NAME			3.2 NAME				
DELETE								
MAVE			T DELETE		ST-ZIP		Change Addition	
STREET ADDRESS			TT DECEME	1	1		□ Auguge □ Modilic	
CITY - ST - ZIP         44 CITY - ST - ZIP           TITLE         DELETE         51 TITLE         Change           HAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY - ST - ZIP         54 CITY - ST - ZIP								
FIFLE								
NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY S1-70F         5.4 CITY-S1-71P			DELETE	_	11 &11		Change Addition	
STREET ADDRESS  CHY_S1-Z0F  5.4 CTY-S1-ZIP			<del></del>	•			- —	
CITY_ST-ZIP 5.4 CITY-ST-ZIP					ADDRESS			
				1	- 1			
Hills   □ DELETE ■ 6.1 Hills   □ Deleting □	liti E		☐ DELETE	6.1 TITLE			Change Addition	
NAME 6.2 NAME	NAME			6.2 NAME				
STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS			6.3 STREE	i address			
CHY-ST-ZIP  6.4 CHY-ST-ZIP  6.4 CHY-ST-ZIP  1.4 Like hereby certify that the information supplied with this filing does not qualify for the everyntion stated in Section 119 D7(3Vi). Florida Statutos I further certify that the	CHY-ST-ZIP						· · · · · · · · · · · · · · · · · · ·	

I do 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 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.

Colonia DE CALLELO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR