4-9-98 B 4354 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

2s. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

29

9. Name and Address of Current Registered Agent

PALM BEACH YACHT CREW INC.

4200 POINSETTIA AVENUE

WEST PALM BEACH FL 33407

CORPORATION ANNUAL REPORT

1998

Principal Place of Business

4200 POINSETTIA AVENUE

WEST PALM BEACH FL 33407

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

22

23 Zip

24

PALM BEACH YACHT CREW INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000080114 (8)

PALM BEACH YACHT CREW, INC.

25

WEST PALM BEACH FL 33407

DONNA M MACPHAIL 4200 POINSETTIA AVE

FILED Apr 09 1998 8:00am Secretary of State

	DO NOT WRITE IN THIS SPACE			
	 Date Incorporated or Qualified 10/18/1995 			
	4. FEI Number	Applied For		
	65-0616009	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		
	This corporation owes or has paid the operation and Property Tax due June 30.	current year Intangible Yes No		
	10. Name and Address of New Registere	d Agent		
Name				
Street Ad	dress (P.O. Box Number is Not Acceptable)			
		[an] 3:- 0. I.		

561.863.0082

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 purised inputs of registered agent and table of grade able. (NOTE: Registered Agent signature requires when reinstating) DATE OATE				
12.	OFFICERS AND DIRECTORS	T 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P DELETE	1.1 TITLE	Change Addition	
NAME	MACPHAIL, DONNA M	1.2 NAME		
STREET ADDRESS	4200 POINSETTIA AVENUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33407	1.4 CITY-ST-ZIP		
TITLE	V DELETE	21 TITLE	☐ Change ☐ Addition	
NAME	MACPHAIL, DUANE C	2.2 NAME		
STREET ADDRESS	4200 POINSETTIA AVENUE	2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33407	2. 4 CITY - ST - ZIP		
TITLE	DELETE	3.1 TITLE	Change Addition	
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE	Change Addition	
NAME I		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE	Change Addition	
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE	Change Addition	
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I 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.				

Country

82

83