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FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000048816 (9)

1. Corporation Name
BOAT DEALERS' ALLIANCE, INC.

Principal Place of Business

3983 PINE POINT RD.
ST. CLOUD MN 56303

Mailing Address

3983 PINE POINT RD.
ST. CLOUD MN 56303

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1995

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

4. FEI Number

41-1822266

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NAGIN, STEPHEN E
200 S BISCAYNE BLVD
STE 3580
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

3225 Aviation Ave-Third Floor

83

84 City
Miami

85 Zip Code
FL 33133-4741

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EDC
MANION, PATRICK
3983 PINE POINT RD
ST. CLOUD MN

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
BOUCY, ROBERT
SPRING POINT MARINE
SOUTH PORTLAND ME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
LUMPKIN, TONY
2600 BUCK'S ISLAND ROAD
SOUTHSIDE AL 35907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KILLINGER, GENE
84 WEST AIRPORT BOULEVARD
PENSACOLA FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
CROCKER, KAY
528 WAYNICK BOULEVARD
WRIGHTSVILLE BEACH NC 28480

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FRANKLIN, FRANK
25 SOUTH TERRELL STREET
METTER GA 30439

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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

SIGNATURE
Patrick J. Manion Jr.

11-29-98 (220) 253-7444

CR2E034 (10/97)