

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 201005 (6)

1. Corporation Name  
**OUTBOARD, INC.**



Principal Place of Business  
**6424 ARLINGTON EXPRESSWAY  
JACKSONVILLE FL 32211**

Mailing Address  
**6424 ARLINGTON EXPRESSWAY  
JACKSONVILLE FL 32211**

3. Date Incorporated or Qualified <b>03/23/1957</b>	3a. Date of Last Report <b>01/18/1995</b>
4. FEI Number <b>59-0790087</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**LOFTIN, WILLIAM A., JR.  
20 HOPSON RD.  
JACKSONVILLE BCH FL 32250**

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 607.002 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 I accept the obligations of, Section 607.0025, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12																																																																																											
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14. I do hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(k), Florida Statutes. I further certify that the information included 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 its registered or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 at change of or on an addition to an address.

SIGNATURE: *Dorothy T. Loftin* 2-21-96 904-724-1400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DOROTHY T. LOFTIN

CR2E034 (12/95)