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

PROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham !

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 293884

(3)

LANTANA BOATYARD INC

Principal Place of Business

Mailing Address

BOB IN DIXIE HIGHWAY LANTANA FL 33462

808 N DIXIE HIGHWAY LANTANA FL 33462-1803

## **FILED** Apr 28 1997 8:00am Secretary of State



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	Principal Place of Business			2a. Mailing Address				4. FEt Number			·-·	
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Sulte, Apt. #, etc.		Ļ	Suite, Apt. #, etc.					5 Certificate of Status Desired		\$8.75	Additional	
22			27					5. Certificate of Status Desired		Fee	Required	
City & State			<del> </del>					, , ,		\$5.0	O May Be	
23 Zip				···				Trust Fund Contribution	<u>L</u>	Adde	d to Fees	
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24					30		· · · · · · · · · · · · · · · · · · ·					
<del></del>		te of Business  2a. Mailing Address  4. FEI Number  59-1097066  Not Applied For Not Applicable  etc.  5. Certificate of Status Desired  \$8.75 Additional										
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					8	32 5	treet Add	ress (P.O. Box Number is Not Accep	table)	**		
PALM BEAUTI FL						12						
						,3						
					8	34 (	City		<b>E</b> 1	85 Z	Code	
11. Pui	rsuant to the provisions of	Sections 607.0502 an	d 607.1508.	Florida Statute	s. the abo	วงe-ก	amed corr	poration submits this statement for th		changing	its registered	
offi agi	ice or registered agent, or ent. Fam familiar with and	both, in the State of F	lorida Such	change was a	ulhorized rida Statut	by th	e corporat	tion's board of directors. I hereby ac	cept the app	ointment a	s registered	
SIGNA		accept the congation	a or, acondi	1 007,0303,110	nda Siatut	103.						
OIGNA	Signature, typod or printed	name of registered agent and	f title it applicable	e. (NOTE	: Rugistered A	Agent s	ignature requi	red when reinstating)	DATE.		***************************************	
12.		OFFICERS AND DI			13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12	
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14. 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 about 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 co-poration 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 in agreetment with an address.