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

PROFIT CORPORATION ANNUAL REPORT



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

1996

 $\overline{(4)}$

DOCUMENT #
1. Corporation Name B.L. YACHTS, INC.

I
I
١
ŀ
l
İ
l
l

Principal Place of Business Mailing Address 4105 MAINE AVE 4105 MAINE AV							THERE HAD BIRD BIRD BIRD HIDEO HIDE	0 4 5 6 10 11 1	.1881 91W1 B1W10 1W81
P.O. BOX 1	128	P.O	05 MAINE AVE D. BOX 1128						
EATON PAR	RK FL 33840	· EA	TON PARK FL 33	3840			2 Data tacamarated as Qualified	The form of least	<u></u>
							3. Date incorporated or Qualified 06/26/1970	3a. Date of Last F 04/26/	1995
2. Principal Plac	ice of Business	2a. Mai	iling Address				4. FEI Number 59-1319617	<u> </u>	Applied For
21		26	- 				29-13 190 17		Not Applicable
Suite, Apt. #,	, etc.	Suit	Suite, Apt. #, etc.				5. Certificate of Status Desired	r 1	5 Additional
City & State			City & State				Fee Required 6. Election Campaign Financing \$5.00 May Be		
23		28	 				Trust Fund Contribution Added to Fees		
Ζφ	¬		Zip Cour		ntry		8. This corporation has liability for intangible tax under s 199.032,		
24	25 29 9. Name and Address of Current Registe		d Anont	30			Florida Statutes X Yes No		
v ·	9, Name and Address of Com-	ent negisteret	1 Agent		81	Name	10. Name and Address of New Re	gistered Agent	
	,Bernard			1			200 5 10 11 11 11 11 11		
	MAINE AVENUE, EATON PARK	(ļ	B2	Street Addres	ss (P.O. Box Number is Not Acceptable	ı)	
EATON	I PARK FL 33840			1	в3				
				ļ	84	City		85 Z	ip Code
	10							FLI	
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Fid n, and accept the obligations of, Se	orida. Such chai	inge was authoriz	zed by the a	ve-n ;orpx	amed corporat oration's board	tion submits this statement for the purp of directors. Thereby accept the appoi	ose of changing its ntment as registered	registered office d agent. I am
SIGNATURE.)		ಆರು ಜ ಾರು, ಕರ					
12.	Signature, typed or printed name of registered age OFFICERS A	AND DIRECTOR	·-···	OTE: Rugistered	Agent	t signature required w	when reinstating: ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	ORS IN 12
TITLE	PD PD		DELETE	1. 1 Ti	ITLE		7,00,110,10,0,13,10,0,10,0,1,1	☐ Change	
NAME	LITTLE,BERNARD SR			1.2 NA	₩ĩ				_
STREET ADDRESS	5404 LUCE ROAD LAKELAND FL			1.3 ST	REET	ADDRESS			
CHTY-ST-ZIP	VO		The same	1,4 CH		1 - ZIP			
THLE	LITTLE, BERNARD, JR.		DELETE	2 1 11				Change	Addition
NAME STOREL ADDRESS	4105 MAINE AVENUE			2 2 NA					
STREET ADDRESS CITY-ST-ZIP	EATON PARK FL					ADDRESS			
TIFLE	STD		DELETE	2 4 C(1 3 1 T)		1 - 2017		☐ Change	[] Addition
NAME	LITTLE, JANE			3.2 NA				L	
STREET ADDRESS	5404 LUCE ROAD					ADDRESS			
CITY-S1-ZIP	LAKELAND FL			3 4 01					
TITLE	AST PERECCA		☐ DELETE	4. 1 J	TLE			☐ Change	Addition
NAME	HAM, REBECCA 4105 MAINE AVE.			4.2 NA	ι ν Έ				
STHEET ADDRESS	EATON PK. FL			4.3 ST	REET	ADDRESS			
CITY ST ZIP	LAIVII III I E		C pourte	4.4 CI		1 - 2IP			
TITLE			DELETE	5 1 1				☐ Change	☐ Addition
NAME CIRCL APPROVED				5 2 NA		:- oneso			
STREET ADDRESS				- 1		ADDRESS			
CITY-ST-ZIP TITLE						T-ZIP			
111166			LJ DELEJE				AF AVA IN A ALAA	□ Channe	☐ Addition
NaMe			☐ DELETE	6 1 7(ITLE			Change	Addition
NAME STREET ADDRESS			☐ DELETE	6.2 NA	ITLE AME	ADDRECC		☐ Criange	Addition
NAME STREET ADDRESS City-St-Zip			□ DELETE	6.2 NA	ITLE AME IREET	ADDRESS		☐ Change	Addition

oath; that I am an officer or director of the corporation or th appears in Block 12 or Block 13 if changed, or on an a late between crustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name not with an address.

PRESIDENT

SIGNATURE: K

3-20-96

941-665-5100