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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - S1 - ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

1-20-97 564-585-1241

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 374754

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PALM COAST YACHTS, INC.

Mailing Address Principal Place of Business 1210 CRESTWOOD BLVD 1210 CRESTWOOD BLVD LAKE WORTH FL 33460-1746 LAKE WORTH FL 33460 3. Date incorporated or Qualified 3a. Date of Last Report 12/31/1970 02/21/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1357859 Not Applicable 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Ζıp Country Zrp 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BOAL, RUTH C 1210 CRESTWOOD BLVD Street Address (P.O. Box Number is Not Acceptable) **LAKE WORTH FL 33460** 83 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regimencollagent and title if applicable (NOTE Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. D DELETE ☐ Change ___ Addition TITLE 1.1 TITLE **BOALNORMAN V** NAME 1.2 NAME 1210 CRESTWOOD BLVD STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE FILLE **BOAL.RUTH C** NAME 2.2 NAME 1210 CRESTWOOD BLVD 2.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 2. 4 CITY - ST - ZIP CITY - ST - ZIF DELETE Change Addition 3.1 TITLE TIFLE BOAL, RUTH C MAME 3.2 NAME 1210 CRESTWOOD BLVD 3.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 3.4. CITY-ST-ZIP CITY-ST-Z:P DELETE Addition 4.1 TITLE Change TITLE 4 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition ☐ DELETÉ 51 TITLE TITLE 5.2 NAME NAME **53 STREET ADDRESS** STREET ADDRESS CITY-SI-ZIP 5.4 CiTY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP

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 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.