

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAR 24 PM 1:31

DOCUMENT # 531434 (9)

1. Corporation Name
POWERLINE BANANA BOAT, INC.

Principal Place of Business: 1441 SW 26 AVE
POMPANO BEACH FL 33069
Mailing Address: 1441 SW 26 AVE
POMPANO BEACH FL 33069

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **04/13/1977**
3a. Date of Last Report: **04/28/1994**
4. FEI Number: **59-1737303**
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 has liability for intangible tax under S. 199.032, Florida Statutes: ☒ Yes ☐ No

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

9. Name and Address of Current Registered Agent

**BURGESS, GORDON G
3100 NE 49TH ST #702
FT LAUDERDALE, FL
33308**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	BURGESS, GORDON G	1.2 NAME	
STREET ADDRESS	3100 NE 49TH ST APT 702	1.3 STREET ADDRESS	
CITY- ST- ZIP	FT LAUDERDALE, FL 0	1.4 CITY- ST- ZIP	
TITLE	VPD	2.1 TITLE	☐ Change ☐ Addition
NAME	BURGESS, WILLIAM G.	2.2 NAME	
STREET ADDRESS	10882 N.W. 15TH ST.	2.3 STREET ADDRESS	
CITY- ST- ZIP	CORAL SPRING FL	2.4 CITY- ST- ZIP	
TITLE	STD	3.1 TITLE	☐ Change ☐ Addition
NAME	BURGESS, MARY F.	3.2 NAME	
STREET ADDRESS	3100 N.E. 49 ST. APT. 702	3.3 STREET ADDRESS	
CITY- ST- ZIP	FT. LAUDERDALE FL	3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gordon G. Burgess
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GORDON G. BURGESS

3-20-95 305-972-7600
Date
Telephone (Area #)