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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 582849

1. Corporation Name

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90089 042 ***150.00

| JOHNSO | n Sails, inc. | | | | | | | | | |
|--|---|-------------|--------------------------|-----------|---|-----------|--|--|------------------|--------------|
| Principal Place | e of Business | Ma | ailing Address | | | | | i giğli ğiğli | 81811 914 | |
| 3000 GANDY BOULEVARD SOUTH P.O. BOX 20926 ST. PETERSBURG FL 33702 ST. PETERSBURG FL 33742 | | | | | | | | | _ | |
| | | | | | | | DO NOT WRITE IN TH | IS SPACE | | |
| | · | | | | | | 3. Date Incorporated or Qualifed 08/21/1978 | | | |
| 2. Principal Place of Business | | | 2a. Mailing Address | | | | 4. FEI Number | Applied For | | |
| 21 | | | | | | | 59-1851709 | | | Applicable |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 5. Certifcate of Status Desired | | /DAG ee Req | ditional |
| 22 | | 27 | 014 0 04-4- | | | | | | | |
| — · | 0.05-1 | | City & State | | | | 8. Election Campaign Financing | | ded to | flay Be |
| 23 | | 28 | Zip | Соц | ntn | | Trust Fund Contribution 8. This corporation owes the current year | | | |
| Zip | Country | <u> </u> | | 30 | iiu y | | Personal Property Tax. | intangibie ⊟Yes | | XINO Paid |
| 24 | 9. Name and Address of Current | 29 Regis | | 30 | ı - | | 10. Name and Address of New Registere | | | |
| | J. Haine and Address of Current | vealig | Marad Whatt | | 81 | Name | | | | |
| FRENCH, LARRY | | | | | | | | | | |
| 3000 GANDY BOULEVARD SOUTH | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | İ |
| ST. I | PETERSBURG FL 33702 | | | | 83 | | | • | | |
| | | | | | | | | | | |
| | * | | | | 84 | City | | L 85 | Zip C | ode |
| agent. I a SIGNATURE | m familiar with, and accept the obligat | ions of, | , Section 607.0505, Flor | ida Stati | utes | · | on's board of directors. I hereby accept the appearance of the property of the | | | |
| 12. | OFFICERS ANI | DIRE | CTORS | 13. | _ | | ADDITIONS/CHANGES TO OFFICERS | | | |
| TITLE | PD. | | ☐ DELETE | 1,1 T | πE | | | ☐ Ch | ange | Addition |
| NAME | FRENCH, LARRY | | | 1.2 N | ME | | | | | |
| STREET ADDRESS | 3000 gandy boulevard sou | ITH | | 1.3 51 | REET | T ADDRESS | • | | | 1 |
| CITY-ST-ZIP | ST. PETERSBURG FL 33702 | | | 1.4 CI | TY-S1 | T-ZIP | | | | |
| TITLE | D | | ☐ DELETE | 2.1 Ti | TLE | | , | ☐ Ch | ange | Addition |
| NAME | FRENCH, HELEN J. | | | 2.2 N | AME. | | | | | |
| STREET ADDRESS | 3000 gandy boulevard sou | ΠH | | 2.3 S | REET | TADORESS | | | | 1 |
| CITY-ST-ZIP | ST. PETERSBURG FL 33702 | | <u> </u> | - 2.4 C | ITY-S | ST-ZIP. | <u> </u> | | - | |
| TITLE | | | | 3.1 TI | TLE | | | ☐ Ch | ange | ☐ Addition |
| NAME | | | | 3.2 N | AME | | | | | |
| STREET ADDRESS | | | | 3.3 S | TREET | TADDRESS | • | | | |
| CITY-ST-ZIP | | | _ | 3.4, C | ITY-S | ST-ZIP | | | | |
| TITLE | | | ☐ DELETE | 4,1 TJ | TLE | | | ☐ Ch | ange | Addition |
| NAME | • | | | 4. 2 N | AME | | | | | |
| STREET ADDRESS | · · | | | 4.3 \$ | REET | TADDRESS | | | | } |
| CITY-ST-ZIP | | | | _ | TY-S | T-ZIP | | | | |
| TITLE | | | ☐ DELETE | 5.1 TI | | | | ☐ Ch | ange | ☐ Addition] |
| NAME | | | | 5.2 N | | | | | | Ì |
| STREET ADDRESS | | | | | | TADORESS | • | | | |
| CITY-ST-ZIP | | | | | | T-ZIP | | | | |
| TITLE | , | | ☐ DELETE | 6.1 TI | | ľ | | ☐ Ch | ange | Addition |
| NAME | | | | 6.2 N | | ł | | | | |
| STREET ADDRESS | | | | | | TADDRESS | | | | |
| | | | | 640 | TV_S | T_71D | | | |) |

14. I 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 suppliemental 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, with all other like empowered.

SIGNATURE:

3-10-99