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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

TRADITIONAL WATERCRAFT, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address			1 1981)19 01)11 01011 10011 41801 11011 124	II DIGE DIGIT GIBTI BEDET BIO	
1979 WILD A	CRES ROAD	1979 WILD ACRES ROA	w				
LARGO FL 23771 LARGO FL 34641 US					DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualified	111 1110 017102	
					12/06/1979		
2. Principal Place of Business 2a. Mailing Address				4, FEI Number	Ar	pplied For	
Suite, Apt. #, etc.		26		59-1959797		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired
City & Stat	θ	City & State			6, Election Campaign Financing		May Be
23	-	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Countr	y	B. This corporation owes or has pa	id the current year Int	tangible
24	25	29	30		Personal Property Tax due June] No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	glatered Agent	
	HNSON, ROBERT K		81	Name			
10733 SPRING STREET			82	Street Add	Street Address (P.O. Box Number is Not Acceptable)		
LA	RGO FL 33774		83	<u> </u>			
				1_			
			84	City		85 Zip	Code
44 Pursuant	to the provisions of Sections 607.05	502 and 607 1508 Florida State	rtes the abov	e-named corr	poration submits this statement for the p		te registered
SIGNATURE	Signature, typed or ponted name of registered a	agent and little if applicable (NC	OTE: Registered Ag		tion's board of directors. I hereby acceptions when reinstating)	DATE	
12.	OFFICERS A	MUDIBLECTUBE					
	· · · · · · · · · · · · · · · · · · ·		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR Change	
TITLE NAME	PD JOHNSON, ROBERT K		1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFIC		
TITLE NAME STREET ADDRESS	PD JOHNSON, ROBERT K 10733 SPRING ST.		1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS			
TITLE NAME	PD JOHNSON, ROBERT K		1.1 TITLE 1.2 NAME	T ADDRESS ST-ZIP 3	3774		RS IN 12 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, ROBERT K 10733 SPRING ST. LARGO, FL 00000 S	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS ST-ZIP 3:	3774	∑ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD JOHNSON, ROBERT K 10733 SPRING ST. LARGO, FL 00000	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	T ADDRESS ST-ZIP 3:	3774	∑ Change	Addition
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indicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustee empowers Block 12 or Block 13 if changed, or on an attachment with an address. required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: ROBERT

K. JOHNSON