

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90078 047 ***150.00

DOCUMENT # 653399

1. Corporation Name

PRIOR BOATBUILDERS, INC.

Principal Place of Business

4100 BAYSHORE BLVD
PO BOX 645
DUNEDIN FL 34697

Mailing Address

4100 BAYSHORE BLVD
PO BOX 645
DUNEDIN FL 34697

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/16/1980

4. FEI Number

59-1963387

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

9. Name and Address of Current Registered Agent

PRIOR, HARVEY L.
4100 BAYSHORE BLVD.
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME PRIOR, HARVEY L
STREET ADDRESS 10 EAGLE LANE
CITY-ST-ZIP PALM HARBOR FL

TITLE D ☐ DELETE
NAME PRIOR, RICHARD
STREET ADDRESS 3331 LITTLE CIR
CITY-ST-ZIP GAINESVILLE GA

TITLE D ☐ DELETE
NAME PRIOR, W KELLY
STREET ADDRESS 4890 W. KENNEDY BLVD., SUITE 450
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME PRIOR, DANIEL
STREET ADDRESS 3477 JENNY LANE
CITY-ST-ZIP BARLETT TN 38135

TITLE SD ☐ DELETE
NAME PRIOR, JOANNE H.
STREET ADDRESS 10 EAGLE LANE
CITY-ST-ZIP PALM HARBOR FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 5444 BAY CENTER DR, SUITE 103
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

Harvey L. Prior
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/99

Date

727-784-1396

Daytime Phone #

CR2E034 (11/98)