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Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 711735 (1)

1. Corporation Name

FLOTILLA SIX, INC.

Principal Place of Business	Mailing Address
1199 N OCEAN BLVD P.O. BOX 1272 BOCA RATON FL 33429	1199 N OCEAN BLVD P.O. BOX 1272 BOCA RATON FL 33429-1272

3. Date Incorporated or Qualified: **11/02/1966**
3a. Date of Last Report: **03/06/1996**

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

4. FEI Number: **59-6194388** ☐ 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

9. Name and Address of Current Registered Agent

MULLIN, JAMES
2263 NW 2ND AVE. #205
BOCA BOCA RATON FL 33431

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	JANOWICH, JANET		1.2 NAME	RICHARD J. CELESTINO	
STREET ADDRESS	2800 NE 14TH STREET #126		1.3 STREET ADDRESS	1398 S.W. 5TH ST	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	VPD	☒ DELETE	2.1 TITLE	SD	☐ Change ☒ Addition
NAME	GARROW, HENRY		2.2 NAME	JOAN ANDERSON	
STREET ADDRESS	P.O. BOX 7166		2.3 STREET ADDRESS	1402 S.W. 14TH ST	
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	BOCA RATON, FL 33486	
TITLE	SD	☐ DELETE	3.1 TITLE	VPD	☒ Change ☐ Addition
NAME	MULLIN, JAMES		3.2 NAME	JAMES MULLIN	
STREET ADDRESS	2263 NW 2ND AVENUE #205		3.3 STREET ADDRESS	2263 N.W. 2ND AVE #205	
CITY-ST-ZIP	BOCA RATON FL		3.4 CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	TD	☒ DELETE	4.1 TITLE	TD	☐ Change ☒ Addition
NAME	GARDNER, SANDRA L.		4.2 NAME	ROBERT A. TUST	
STREET ADDRESS	1028 RUSSELL DRIVE		4.3 STREET ADDRESS	2717 FLORIDA BLVD. #424	
CITY-ST-ZIP	HIGHLAND BEACH FL		4.4 CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ROBERT A. TUST ROBERT A TUST 1/14/97 (561) 279-2428
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0041926