FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **712761** **(6)**

1. Corporation Name

CHARLOTTE HARBOR FLOTILLA, INC.

Principal Place of Business	Mailing Address
~~U S COAST GUARD FL98~~ ~~P O BOX 2182 N/A~~ ~~PORT CHARLOTTE FL 33952~~ US	~~18328 DRIGGERS AVENUE~~ ~~PORT CHARLOTTE FL 33948-6913~~ ~~US~~

3. Date Incorporated or Qualified: 05/18/1967
3a. Date of Last Report: 03/22/1995

2. Principal Place of Business	2a. Mailing Address
21 CHARLOTTE HARBOR FLOTILLA INC	26 [redacted] CHARLOTTE HARBOR FLOTILLA, INC
Suite, Apt. #, etc. 22 AO BOX 2182	Suite, Apt. #, etc. 27 PO BOX 2182
City & State 23 PORT CHARLOTTE FL	City & State 28 PORT CHARLOTTE FL
Zip 24 33949 Country 25 US CHARLOTTE	Zip 29 33949 Country 30 US CHARLOTTE

4. FEI Number: 59-6215574 ☐ 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

~~BLOSSFELD, HEINZ F~~
~~2230 CASSINO COURT~~
~~PUNTA GORDA FL 33950~~

10. Name and Address of New Registered Agent

81 Name: FRANK J. KAVANAGH
82 Street Address (P.O. Box Number is Not Acceptable): 3306 ANTIGUA DR.
83 PUNTA GORDA
84 City: FL 85 Zip Code: 33950

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: FRANK J. KAVANAUGH — Frank J. Kavanagh — 8-24-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

CR2E037 (12/95)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	11 TITLE	PRES. & DIRECTOR	☒ Change ☐ Addition
NAME	FRANK J. KAVANAGH		12 NAME		
STREET ADDRESS	3306 ANTIGUA DR.		13 STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA FL 33950		14 CITY-ST-ZIP		33950
TITLE	V	☐ DELETE	21 TITLE	1ST V. PRES & DIRECTOR	☒ Change ☐ Addition
NAME	PHILLIP R. MERRILL		22 NAME		
STREET ADDRESS	3936 CROOKED ISLAND		23 STREET ADDRESS		
CITY-ST-ZIP	PUTA GORDA FL 33950		24 CITY-ST-ZIP		33950
TITLE	~~D~~	~~☒ DELETE~~	31 TITLE	2ND V. PRES, & DIR.	☒ Change ☐ Addition
NAME	MASTERS, BRIAN		32 NAME	WILLIAM N. SEILER	
STREET ADDRESS	2280 GULFVIEW RD.		33 STREET ADDRESS	1099 ARCHER ST	
CITY-ST-ZIP	PUNTA GORDA FL		34 CITY-ST-ZIP	PORT CHARLOTTE FL	33952
TITLE	~~TD~~	~~☒ DELETE~~	41 TITLE	SECT. & DIRECTOR	☒ Change ☐ Addition
NAME	MAZZA, RALPH		42 NAME	MAURICE B. WIGOERSON	
STREET ADDRESS	18328 DRIGGERS AVE.		43 STREET ADDRESS	1233 NEAPOLITAN AO	
CITY-ST-ZIP	PORT CHARLOTTE FL		44 CITY-ST-ZIP	PORT CHARLOTTE FL	33983
TITLE	SD	☒ DELETE	51 TITLE	TREAS. & DIRECTOR	☒ Change ☐ Addition
NAME	HAWKINS, LORRAINE		52 NAME	RICHARD B. ADDAMATIS	
STREET ADDRESS	4152 REEF COURT		53 STREET ADDRESS	125 ROSELLE CT	
CITY-ST-ZIP	PT. CHARLOTTE FL		54 CITY-ST-ZIP	PORT CHARLOTTE FL	33952
TITLE	DIRECTOR	☐ DELETE ADD	61 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	ROMMO BARRETT		62 NAME	WILLIAM J. STROBEL	
STREET ADDRESS	1225 NEAPOLITAN RD		63 STREET ADDRESS	1355 RIO BIRO	
CITY-ST-ZIP	PORT CHARLOTTE FL 33983		64 CITY-ST-ZIP	PUNTA GORDA FL	33950

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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Addamatis — 2-24-96 — 941-625-8783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

RICHARD ADDAMATIS 1230-EN AVE TREASURER