**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F43247

1. Corporation Name

HARBOUR BOAT CENTRE, INC.

Principal Place	e of Business	Mailing Address					
2300 STATE ROAD 84		2300 STATE ROAD 84					
FT LAUDERDALE FL 33312		FT LAUDERDALE FL 33312		DO NOT WRITE IN THIS	SDACE		
US		US			3. Date Incorporated or Qualifed	OI ACL	<del></del>
					08/28/1981		
L	In a second District	2a. Mailing Address			4. FEI Number	ΙΔn	plied For
⊢ '	lace of Business				59-2116605	_ <del>                                    </del>	t Applicable
21		Suite, Apt. #, etc.			<u> </u>	\$8.75	
Suite, Apt. #, etc.		Suite, Apr. #, etc.			5. Certifcate of Status Desired	Fee Re	
City & State		City & State			6. Election Campaign Financing	\$5.00	<del></del>
	5	$\neg$ '			Trust Fund Contribution	Added t	
Zíp	Country	28	Zip Country		This corporation owes the current year Inta		
<del></del>	25	29 30			Personal Property Tax.	Yes	₩No
24	9. Name and Address of Current Registered Agent		<del>'</del> '		10. Name and Address of New Registered	Agent	<u> </u>
9. Name and Address of Current Registered Agent				Name			
BEA	RDEN, DAVID		\				
2300 STATE ROAD 84			82	Street	Address (P.O. Box Number is Not Acceptable)		
FT LAUDERDALE FL 33312			83	<del> </del> -			***
}							
}			84	City	FI	85 Zip (	Code
44 Curryant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abov	e-named	corporation submits this statement for the purpose of	changing its	registered
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 a	rn familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes				
SIGNATURE	Signature, typed or printed name of registered agent	AND Y - elicable (NOTE: De	aistored App	at signature r	required when reinstating) DATE		
12.	OFFICERS AND		13.	it signature i	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	TO	DELETE	1.1 TITLE			Change	
NAME	BEARDEN, LORNA A		1.2 NAME				
	2300 STATE ROAD 84			TADORESS			
STREET ADDRESS	FT LAUDERDALE, FL 00000		1.4 CITY-S		ļ		
CITY-ST-ZIP			2.1 TITLE	1-21-		Change	Addition
NAME	TU		2.2 NAME			-	
1	BEARDEN, DAVID		8	TADDRESS	1		
STREET ADDRESS	2000 011112 110110 01		2.3 STREE		and the second second		
CITY-ST-ZIP	S .	☐ DELETE	3.1 TITLE	21-415	S	X Change	Addition
f	~	- Veccie	3.2 NAME			- •	<del></del>
NAME	BEARDEN-GREENE, DENISE J			T ADDRESS	MIELKE Denised 2300 STATE RD 84		
STREET ADDRESS	2000 OTAL HOAD OF				Ft. Lander dale, FL. 337	. \ 7	
CrTY-ST-ZIP	TT B TO DE L'ELLE		3.4. CITY-5 4.1 TITLE	51-ZIP	44.2000 da 40. 12. 20.	Change	Addition
TITLE							
NAME			4. 2 NAME	T 1000-00			!
STREET ADDRESS			ı	TADDRESS			
CITY-ST-ZIP		The server	4.4 CITY-S	T-ZIP		☐ Change	☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				C Abdition
NAME			ı	TADDOCCO			
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		_ <del></del>	5.4 CITY-S	iT-ZIP			
TTTLE		☐ DELETE	6.1 TITLE			Change	Addition

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.

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90024 001 \*\*\*150.00