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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 11 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

1. Corporation	MENT # F536 BOATYARD, INC.	70 (8)			
Principal Place	e of Business	Mailing Address		—{	
126 HIGHWAY 98 E 126 HIGHWAY 90 E					
P.O. BOX 176	1	P.O. BOX 1761			
DESTIN FL 32540		DESTIN FL 32540		DO NOT WRITE IN THIS SPACE	
US				3. Date Incorporated or Qualified	
Dringinal Di	lace of Business	2a. Mailing Address		11/16/1981 4. FEI Number	A sultand For
2. Principal Place of Business		26. Mailing Address		59-2146382	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	urrent year Intangible
24	25	29	30	<u> </u>	Yes No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered	Agent
	SEN, DONALD		B1 Name		
	AARONS REEF		82 Street Add	et Address (P.O. Box Number is Not Acceptable)	
Utt	STIN FL 32541		83		
			83		
			84 City		85 Zip Code
44 Durawant I	Cartone 607	2500 - 4 003 4500 Elorida Statul	the stand con	FI	- _
office or re	egistered agent, or both, in the S	State of Florida. Such change was :	authorized by the corporal	poration submits this statement for the purpose of the submits the specific porable appropriate the submits and su	of changing its registered
agent. I ar	m familiar with, and accept the c	obligations of, Section 607.0505, Fl	orida Statutes.	-	-
SIGNATURE	=	0101		ired when reinstating) DATE	
12.	Signature, typed or printed name of registere OFFICERS	ad agent and little if applicable (NOT S AND DIRECTORS	E: Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	DELETE	1,1 TITLE	Application of the section of the se	Change Addition
NAME	WISEN DONALD	-	1.2 NAME		
STREET ADDRESS	43 AARONS REEF		1.3 STREET ADDRESS		
CITY-ST-ZIP	DESTIN FL		1.4 CiTY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE -	•	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE1 ADDRESS		
CITY-ST-ZIP		Driete	5.4 CITY - ST - ZIP	***************************************	
TITLE		L_] DELET€	6.1 TITLE		L. Change L. Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	of at a 45 of famous and a second	0 0 00 00 00 00 00 00 00 00 00 00 00 00	6.4 CITY - ST - ZIP	0 1 10 02000 5 11 51 12 12 15 15	
indicated of officer or of	on this annual report or supplem	nental annual report is true and acc receiver or trustee empowered to	curate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further cure shall have the same legal effect as if made unuired by Chapter 607, Florida Statutes; and that	nder oath; that I am an