

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

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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000001724 (3)

1. Corporation Name

OMC RECREATIONAL BOAT GROUP, INC.



Principal Place of Business

100 SEA HORSE DR.
WAUKEGAN IL 80085

Mailing Address

100 SEA HORSE DR.
WAUKEGAN IL 80085-2141

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

3. Date Incorporated or Qualified

04/05/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

36-3918531

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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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	D	<input type="checkbox"/> DELETE
NAME	BOWMAN, H.W.	
STREET ADDRESS	100 SEA HORSE DR.	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	EK, W.J.	
STREET ADDRESS	8161 15TH ST., E.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BADDELEY, D.J.	
STREET ADDRESS	100 SEA HORSE DR.	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	MALOVANY, H.	
STREET ADDRESS	100 SEA HORSE DRIVE	
CITY-ST-ZIP	WAUKEGAN IL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	VANIK, B.W.	
STREET ADDRESS	8161 15TH ST., E.	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	OLSON, C.J.	
STREET ADDRESS	7TH & C STREETS	
CITY-ST-ZIP	CULVER OR 97734	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	P
2.3 STREET ADDRESS	VITULLI, C.J.
2.4 CITY-ST-ZIP	100 SEA HORSE DR. WAUKEGAN IL 60085
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	D/V/S
3.3 STREET ADDRESS	BADDELEY, D.J.
3.4 CITY-ST-ZIP	100 SEA HORSE DR. WAUKEGAN IL 60085
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	V
4.3 STREET ADDRESS	FULMER, R.L.
4.4 CITY-ST-ZIP	925 FRISBEE ST. CADILLAC MI 49601
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	V/D
6.3 STREET ADDRESS	ROMANO, R.S.
6.4 CITY-ST-ZIP	100 SEA HORSE DR. WAUKEGAN IL 60085

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 amendment with an address.

SIGNATURE: R.S. ROMANO

VICE PRESIDENT AND
ASST. SECRETARY

847-689-6200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0481716

CR2E034 (9/96)

OMC RECREATIONAL BOAT GROUP, INC.
Officers and Directors

Effective:
01/16/97

Officers:

President
Vice President, Seaswirl
Vice President, Four Winns
Vice President, Sunbird
Vice President and Secretary
Vice President and Assistant Secretary
Assistant Secretary and Treasurer

Vitulli, C.J.
Olson, C.J.
Fulmer, R.L.
Timmer, B.E.
Baddeley, D.J.
Romano, R.S.
Repp, G.G.

Directors:

Chairman

Bowman, H.W.
Baddeley, D.J.
Romano, R.S.