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Apr 21 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # F97000003105 (0)

1. Corporation Name

NAUTICAL ENDEAVORS INC.



Principal Place of Business: 3116 N. FEDERAL HIGHWAY, SUITE 288, LIGHTHOUSE POINT FL 33064

Mailing Address: 3116 N. FEDERAL HIGHWAY, SUITE 288, LIGHTHOUSE POINT FL 33064

2. Principal Place of Business: 11 Lake Shore Dr., Suite, Apt. #, etc.

2a. Mailing Address: 11 Lake Shore Dr., Suite, Apt. #, etc.

23. City & State: Key Largo, FL

24. Zip: 33037

25. Country: Monroe

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27. Zip: 33037

28. Country: Monroe

3. Date Incorporated or Qualified: 06/13/1997

4. FEI Number: 65-0754437

5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent: FREY, JERRY, 806 CAMELLIA COURT, DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent: L. Van Stillman, Esq., 301 Yamato Rd., Suite 1200, Boca Raton, FL 33431

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: L. Van Stillman, Esq. DATE: 4/13/98

12. OFFICERS AND DIRECTORS

TITLE	PD	NAME	FREY, JERRY	STREET ADDRESS	806 CAMELLIA COURT	CITY-ST-ZIP	DEERFIELD BEACH FL 33442	<input checked="" type="checkbox"/> DELETE
TITLE	SDT	NAME	CHRISTIE, MARIE A	STREET ADDRESS	8340 NW 32 AVE.	CITY-ST-ZIP	FT. LAUDERDALE FL 33309	<input checked="" type="checkbox"/> DELETE
TITLE		NAME	Susan Hogan	STREET ADDRESS	11 Lake Shore Dr.	CITY-ST-ZIP	Key Largo, FL 33037	<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Pres/Director	1.2 NAME	Susan Hogan	1.3 STREET ADDRESS	11 Lake Shore Dr.	1.4 CITY-ST-ZIP	Key Largo, FL 33037	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	Director/ Sec/Treas.	2.2 NAME	Ann. D. Collier	2.3 STREET ADDRESS	97 Bailey St.	2.4 CITY-ST-ZIP	Boca Raton, FL 33434	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE		3.2 NAME		3.3 STREET ADDRESS		3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE		5.2 NAME		5.3 STREET ADDRESS		5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Susan Hogan DATE: 4/13/98 (805) 453-3955

CR2E037 (10/97)