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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** F97000005214 (8)

UAC BOAT FUNDING CORP.

FENWICK ISLAND DE

CITY-ST-ZIP

CICKIATURE.

Principal Place of Business Mailing Address 9240 BONITA BEACH RD., STE 1109 BONITA SPRINGS FL 34133 9240 BONITA BEACH RD., STE 1109 BONITA SPRINGS FL 34133 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/06/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 35-1987664 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 34135 Country Country 8. This corporation owes or has paid the current year Intangible 34135 USA USA Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change ☐ Addition TITLE PTD 1.1 TITLE WEST, THOMAS M NAME 1.2 NAME 1614 LANDS ENDS VILLAGE STREET ADDRESS 1.3 STREET ADDRESS CAPTIVA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE X Change Addition TITLE VSAT 2.1 TITLE GRAZIANI, LEEANNE NAME 2.2 NAME 3249 PINE RIDGE ROAD #101 STREET ADDRESS 2.3 STREET ADDRESS 3225 CYPRESS GLEN WAY #101 NAPLES FL MAPLES, FL 34109 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE ASV 3.1 TITLE WAGONER, RICHARD A 3.2 NAME 2394 NASH STREET STREET ADDRESS 3.3 STREET ADDRESS CLEARWATER FL CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE Change 2 Addition TITLE 4.1 TITLE STAINBROOK, JOHN M NAME 4. 2 NAME **8211 LAKE SPRINGS COURT** 250 M. SHADELAND AVENUE STREET ADDRESS 4.3 STREET ADDRESS **INDIANAPOLIS IN** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITL F 51 TITLE HOKANSON, STEVEN P NAME 5.2 NAME **5615 AUDUBON RIDGE** 107 M. PENNSYLVANIA ST., SUITE BOD STREET ADDRESS 5.3 STREET ADDRESS INDIANAPOLIS IN INDIANAPOLIS, IN CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ANDREWS, DAVID P 6.2 NAME 1205 N SCHULTZ ROAD STREET ADDRESS 6.3 STREET ADDRESS

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. (2) W

3/9/98

941/948-1855

**FILED** 

Mar 27 1998 8:00am

Secretary of State