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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G28542

(0)

HOWARD BOAT WORKS, INC.

Principal Place of Business

Mailing Address

FILED Jul 23 1997 8:00am Secretary of State



633 BALLOUGH RD DAYTONA BCH FL 32114			721 BALLOUGH RD. DAYTONA BOH FL 32114-2209									
			US	US				3. Date Incorporated or Qualifies 03/21/1983		3a. Date of Last Report 04/03/1996		
2. Principal Pi	lace of Busines	ss	⊢ '	2a. Mailing Address				4. FEI Number			oplied For	
21			26					59-0298620			ot Applicable	
Sulte, Apt.			27					5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & State	0	·	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution				
Zip 24	Country Ζίρ 25 29				Country 30			8. This corporation has hability for intangible tax under s. 199.032, Florida Statutes Yes No				
9, Name and Address of Current Registered Agent								10. Name and Address of New I	Registered A	gent		
PALMETTO CHARTER SERVICES, INC						l Nam	18					
	Magnolia A Tona Beach		82			Street Address (P.O. Box Number is Not Acceptable)						
	i											
	5 g	•			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		printed name of registered ag							DATE			
12.	Signature, lyped or p		D DIRECTORS	INOH	13.	jout signa	ore require	od when reinstating) ADDITIONS/CHANGES TO OF		DIRECTOR	3S IN 12	
TITLE	DPS	017102110711	Bulletions	DELETE	1.1 TITLE			ADDITIONS OF PARTIES TO OFF	10211071110	Change	Addition	
NAME	LEMANCZY	K. Kurt			1.2 NAME					-	,	
STREET ADDRESS	LUEBBENA	UER WEG #14; 0-1	187		1.3 STREE	T AUDRES	s				Į,	
CITY-ST-ZIP	BERLINE K	arolinenhof ge			1.4 CITY-	ST-ZIP						
TITLE	1	L		DELETE	2.1 TITLE					Change	☐ Addition	
NAME	LEMANCZY		400		2.2 NAME							
STREET ADDRESS		UER WEG #14; 0-1 ROLINENHOF GE	1187				S				,	
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STREET ADDRESS					3.3 STREE							
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NAME					5.2 NAME							
Street address					5 3 STREE	1 ADDRES	s					
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NAME					6.2 NAME							
STREET ADDRESS					1	1 ADDRES	S					
CITY-ST-ZIP					6.4 CiTY -	ST-ZIP		····				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted emperated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Grand and the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted emperated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Block 13 or On an attribute and of the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the corporation of

7/19/27