FILED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT May 01 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # G60601 (3) ROSEMEYER'S BOAT RENTALS, INC. Principal Place of Business Mailing Address 3281 N.E. INDIAN RIVER DR. 3281 N.E. INDIAN_RIVER DR. JENSEN BEACH FL 34997 JENSEN BEACH FL 34957-4107 3. Date incorporated or Qualified 3a. Date of Last Report 09/21/1983 04/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3321 NE 59-2336693 5240 SE, SEASCAPE Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired WHYES Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be JENSEN BEILOH Stuons Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199,032, USA 34 34997 U3 4 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ROSEMEYER, WILLIAM W. Name 5220 SE SEASCAPE WAY #3 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34997 83 84 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. Kesmeen (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE Change TITLE 1.1 TITLE Addition ROSEMEYER, WILLIAM W. NAME 1.2 NAME 5220 SE SEASCAPE WAY #3 STREET ADDRESS 1.3 STREET ADDRESS STUART FL CITY-ST-ZIP 14 City-St-ZiP STD TITLE DELETE Change 2.1 TIILE Addition ROSEMEYER, CAROLINE L. 2.2 NAME 5220 SE SEASCAPE WAY #3 STREET ADDRESS 2.3 STREET ADDRESS STUART FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-ST-ZIP DELETE TITLE 5.1 TOLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TILLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - \$1 - 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 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 eath, that 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