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 # G83578

(6)

STUART YACHT BUILDERS, INC.

FILED
Apr 16 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address C/O G. N. BURDICK 450 S.W. SALERNO ROAD Address C/O G. N. BURDICK 450 S.W. SALERNO ROAD						A 1981111 4083 10100 1110 SITE 1688 1851 61011 41611 61611 61611 61611 61611			
						1			
450 S.W. SALE STUART FL 34		450 S.W. SALERNO ROAD STUART FL 34997-8250							
OTOMITI TE OT	40 0					3. Date Incorporated or Qualified 3a. Date of Last Report 02/07/1984 04/29/1996			eport
2. Princ pal P	lace of Business	2a. Mailing Address				4. FEI Number	1 7.9		oplied For
21		26				59-2425101		No	ot Applicable
Suite Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22	27							equired	
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution	<u>L]</u>		to Fees
Zip TTI	Country	Zip	30	ишу		 This corporation has liability the Florida Statutes 	or intangible Yes	≀tax under s □ No	199.032,
24	25 9. Name and Address of Curre	29 ent Registered Agent	[30]			10. Name and Address of New			
RUE	RDICK, G. N.			81	Name		T.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	
	S.W. SALERNO ROAD						4 - 4 - 5 - 5		
	JART FL 34997			82	Street Add	dress (P.O. Box Number is Not Accept	natole)		
0.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			83					
				84	O't-			as 7in	Code
					City		FL	_ '	
11. Persuant office or	to the provisions of Sections 607.05 registered agent, or both, in the Stat	02 and 607.1508, Florida Statut te of Florida. Such change was	es, the al authorize	bove d by	e-named cor the corpora	rporation submits this statement for thation's board of directors. I hereby ac	e purpose o cept the app	I changing it pointment as	ts registered registered
agent La	ant familiar with, and accept the obli	gations of, Section 607,0505, Fk	orida Stat	tutes	3.				
SIGNATURE.	Signature, typind or printed name of registered a	NO.	F Barrietere	d Ans	on au tennia for	uired when reinstating)	DATE		
12.		ND DIRECTORS	13.		on organica o roqu	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	RS IN 12
THILE	PD	DELETE	1.1 1	TLE				Change	Addition
HAME	BURDICK, G. N.		1.2 N	AME					
STREET ADDRESS	450 S.W. SALERNO RD.		1.3 S	TREET	ADDRESS				•
CHY-S1-ZIF	STUART FL		1.4 0	ITY-S	ST - ZIP				
T-TLE	STD	☐ DELETE	2.1 TI	2.1 TITLE				Change	Addition
NAME	BURDICK, NANCY G.		22 N	AME					
STREET AODRESS	450 S.W. SALERNO RD.		235	TREET	ADDRESS				
CHY-S1-Z4	STUART FL			2 4 CITY-ST-ZIP				Change	Addition
THE	AITHORNION DOLLOLAG T	☐ DELETE	-					LI Charge	L Addition
NAME	NEWBIGIN, DOUGLAS T. 450 SW SALERNO RD		32 N		14000000				
STREET ADDRESS	STUART FL	ATTILLED FI			ADDRESS				
CITY - ST - ZIP	O I UNITE	DELETE	4.1 TITL		ST-ZIP			Change	Addition
TITLE NAME		hand Occupe	4.2)						
STREET ADORESS					ADDRESS				
City - ST - ZIP					ST-ZIP				
THILE		DELETE	5.1 T			**************************************	 y	Change	Addition
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 S	TREET	T ADDRESS				•
CITY - ST- ZIP			5.4 C	: YTI	ST-ZIP				
1616		DELETE	6.1 T	ITLE				Change	Addition
NAME			6.2 N	AME	1				
STREET ADDRESS			6.3 S	TREE	T ADDRESS				
CITY - ST - ZIP					ST-ZIP				
A.A. Lata base	the and the their the information around	ical with this filing done not awal	lifu for the	000	amntion stati	ed in Section 119 07(3)(i). Florida Sta	nares Itarth	ar certify that	J IOA

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 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 artisachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/97 561/283-1947