## 5-4.98 B 6309 -C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 



Secretary of State **DIVISION OF CORPORATIONS** 

**1998** 

1. Corporatio	MENT # H1357 OPLUM MARINA AND STORA	<b>(</b> )					
Principal Place of Business  88 COCO PLUM DR  MARATHON FL 33050 US		Mailing Address 66 COCO PLUM DR MARATHON FL 33050 US				NRITE IN THIS SPACE	
		•			3. Date Incorporated or Qua	ified	
	Place of Business	2a. Mailing Address			07/24/1984 4. FEI Number	Applied For	
21	····	26			59-2539038	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	├ <b>─</b> ─ <b>┐</b>		5. Certificate of Status Desire	ed S8.75 Additional Fee Regulred	
City & Stat		Cily & State			6. Election Campaign Finance		
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	7ip	Country		8. This corporation owes or h	nas paid the current year Intangible	
24	25	29 3	0		Personal Property Tax due		
	g. Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of No	ew Registered Agent	
	Bar <b>an</b> , Joseph L. 86 <b>CO</b> CO Plum Drive						
MARATHON FL 33050			82	82 Street Address (P.O. Box Number is Not Acceptable)			
"			83	<del></del>			
			84	City		85 Zip Code	
<u> </u>	10 // 0070500	1007 (FOR F1 ) 1 (B) 1				FL 3 2 P COAS	
11. Pursuant office or r	to the provisions of Sections 607,0502 registered agent, or both, in the State of	and 607,1508, Florida Statutes, Florida, Such change was aut	the above thorized by	-named co the corpor	orporation submits this statement to ration's board of directors. I hereby	the purpose of changing its registered accept the appointment as registered	
] agent⊦ia I	im familiar with, and accept the obligat	ions of, Section 607.0505, Florid	da Statutes.				
SIGNATURE	Signature typed or printed name of registered agen	and tile if application (NOTE: F	Regislered Ager	nt signature rec	quired when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12	
TITLE	P PARA 400FDU	L_J DELETE	1.1 TITLE	1	Pres - Sec,	Change Addition	
NAME	BARAN, JOSEPH L. 66 COCO PLUM DRIVE		1.2 NAME		Bovon, Good Movathon, Fl	W L .	
STREET ADDRESS	MARATHON FL		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		Movathon, Fl	33050	
CITY-ST-ZIP TITLE	ST			- ZIP		Change Addition	
NAME	BARAN, JANET L.		2.1 TITLE 2.2 NAME				
STREET ADDRESS	66 COCO PLUM DRIVE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MARATHON FL		2.4 CITY-S	T-ZIP			
TITLE	VP	DELETE	3.1 TITLE			Change Addition	
NAME	LOUDENSLAGER, WILLIAM E		3.2 NAME				
STREET ADDRESS	66 COCO PLUM DR		3.3 STREET A	ADDRESS			
CITY-ST-ZIP	MARATHON FL	The second	3.4. CITY- ST	I - ZiP	· · · · · · · · · · · · · · · · · · ·	Observed	
TITLE		DELETE	4.1 TITLE	- 1		Change Addition	
NAME CTREET ADDRESS			4.2 NAME	ADDDCCC			
STREET ADDRESS CITY-ST-ZIP	·		4.3 STREET A 4.4 City-St				
TITLE		☐ DELETE	5.1 TITLE	- 211		Change Addition	
NAME			5.2 NAME			•	
STREET ADDRESS			5.3 STREET A	ADDRESS			
CFTY-ST-ZIP			5.4 CITY-ST	- ZIP			
TITLE		☐ DELETE	6.1 THILE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS		i	6.3 STREET A	ADDRESS			

14. Thereby 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.

6.4 CITY-ST-ZIP

**FILED** 

May 04 1998 8:00am

Secretary of State