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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # J00117

YACHTS OF LAUDERDALE INC.

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90002 003 ***150.00



Principal Place of Business Mailing Address					- I JABIEN miet Anfilt mirat lanet trutt none Dieber i	YSBU BYBY BIBIS BI	Att Statt teat
728 W CANAL ST.		728 W CANAL ST.	== :: •: •:				
. • • • • • • • • • • • • • • • • • • •		P O BOX 942 NEW SMYRNA BCH, FL 32170			DO NOT WRITE IN THIS SPACE		
NEW SMYRNA BCH. FL 32170-7942 NEW SMYRNA BCH. FL 3217		V : V7E		3. Date Incorporated or Qualifed			
					02/19/1986		
2. Principal Place of Business 2a. Mailing Address				. +	4, FEI Number	Apr	plied For
21 26					59-2629369	Not	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	1
22 27						Fee Re	
City & State		City & State		6. Election Campaign Financing	\$5.00		
23	28 Zip Co		Country		Trust Fund Contribution	Added to	5 rees
Zip	Country			1	 This corporation owes the current year In Personal Property Tax. 		□No
24 25 29 30 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered		
 -	S. Name and Address of Corre	int Kegistered Agent	81	Name			
GEIS	ELMAN, FRANK T.		 				
728 W CANAL ST.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
NEW	SMYRNA BCH. FL 32070		83				
)						85 Zip C	- Code
			84	City	FI	85 Zip C	70 06
11, Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statutes	, the abov	e-named corp	poration submits this statement for the purpose o	f changing its	registered
l office or a	egistered agent, or both, in the State in familiar with, and accept the oblig	an Findaa Such change was auc	TOUZEU DV	r me convoran	on's board of directors. I hereby accept the appo	anument as reg	Jistered
Į.	manual man, and decept and early						
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	eg:stered Age	nt signature require	d when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12 Addition
TITLE .	DP	DELETE 1.11				□ change	[] Addition
NAME	GEISELMAN, FRANK T.		1.2 NAME	Ì			'
STREET ADDRESS	728 W CANAL ST.			TADDRESS			
CITY-ST-ZIP	NEW SMYRNA BCH. FL			ST-ZIP		Change	☐ Addition
TITLE	V	□ DECETE	2.1 TITLE 2.2 NAME	ĺ			
NAME	GEIGELIVIAIN, GALE			T ADDRESS			- : / *
}	720 W ONIVAL OI:		2.3 STREE	-			l
CITY-ST-ZIP	TICH ONLINE DOTATE		3.1 TITLE	31-211		☐ Change	Addition
NAME	· I		3.2 NAME				
STREET ADDRESS	728 W CANAL ST.		1	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-				
TITLE	DST	DELETE 4.5				Change	☐ Addition
NAME	GEISELMAN, RIXIE M.		4. 2 NAME	:			
STREET ADDRESS			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP	NEW SMYRNA BCH. FL		4.4 CITY-5	ST-ZIP			
TITLE	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-5				
TITLE (i).			6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	.			
STREET ADDRESS	The state of the state of			ET ADDRESS			
1	1		6.4 CITY-5	ST-7IP			

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, with all other like empowered.

SIGNATURE:

904-427-074