FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
95 MAY -1 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J73448** **(9)**

1. Corporate Name
WATER SPORTS, INC.

Principal Place of Business
% BRUCE W. HUPPERT JR
814 NORTHLAKE BLVD
N PALM BEACH FL 33408

Mailing Address
% BRUCE W. HUPPERT JR
814 NORTHLAKE BLVD
N PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/15/1987**
3a. Date of Last Report: **08/11/1994**

2. Principal Place of Business — 21
Suite Apt # etc. — 22
City & State — 23
Zip — 24 County — 25

2a. Mailing Address — 26
Suite Apt # etc. — 27
City & State — 28
Zip — 29 County — 30

4. FEI Number: **59-2813131** — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HUPPERT, BRUCE W. JR
814 NORTHLAKE BLVD
N PALM BEACH FL 33408

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.0508, 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. The character of business of the corporation is found at one time. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of my position as registered agent, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUPPERT, BRUCE W. JR
STREET ADDRESS	15269 79TH TERR NORTH
CITY, ST, ZIP	PALM BEACH GARDENS FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report, corrected, if necessary, and based upon, for the purpose stated in Section 607.0505, Florida Statutes. I further certify that the information contained on the annual report or application of corporate report is true and correct 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 the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 as changed or an addition thereto with an addition.

SIGNATURE: B. W. Huppert Jr. 4/29/95 407-845-2100
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #
Bruce W. Huppert Jr.

0247286 CP