

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 # **K29648** (8)  
1. Corporation Name  
**HUNT YACHT MANAGEMENT CONSULTANT, INC.**

Principal Place of Business  
**% CURTIS A. HUNT  
6513 SW 8TH COURT  
NORTH LAUDERDALE FL 33068**

Mailing Address  
**% CURTIS A. HUNT  
6513 SW 8TH COURT  
NORTH LAUDERDALE FL 33068-2615**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

**HUNT, CURTIS A.  
6513 SW 8TH COURT  
NORTH LAUDERDALE FL 33068**

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 607.0502 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.

SIGNATURE

*Curtis A. Hunt*

*CURTIS A. HUNT*

3-27-97

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **HUNT, CURTIS A.**  
STREET ADDRESS **6513 SW 8TH COURT**  
CITY-ST-ZIP **NORTH LAUDERDALE FL**

TITLE **SD** ☐ DELETE

NAME **HUNT, JOAN T.**  
STREET ADDRESS **6513 SW 8TH COURT**  
CITY-ST-ZIP **NORTH LAUDERDALE FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition

1.2 NAME **HUNT, CURTIS A.**  
1.3 STREET ADDRESS **9241 NW 1ST ST**  
1.4 CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

2.1 TITLE **SD** ☒ Change ☐ Addition

2.2 NAME **HUNT, JOAN T.**  
2.3 STREET ADDRESS **9241 NW 1ST ST**  
2.4 CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 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.

SIGNATURE:

*Curtis A. Hunt*

*CURTIS A. HUNT*

3-26-97

954-340-8962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0153485

CR2E034 (9/96)

FILED  
Apr 02 1997 8:00am  
Secretary of State

