

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90062 017 ***158.75

DOCUMENT # L20484

1. Corporation Name

ISLAND SAILBOAT & JET SKI RENTAL, INC.



Principal Place of Business

830-ESTERO BLVD
FT. MYERS BCH FL 33901
US

Mailing Address

6617 FURMAN BLVD
FT MYERS FL 33919
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/02/1989

4. FEI Number

65-0148558

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 1010 ESTERO BLVD

Suite, Apt. #, etc.

22 City & State

23 FORT MYERS BEACH FL

Zip

24 33931

Country

25 USA

2a. Mailing Address

26 P O Box 2862

Suite, Apt. #, etc.

27 City & State

28 FORT MYERS BEACH, FL

Zip

29 33932

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

KERKESNER, CHARLES P.
6517 FURMAN BLVD
FORT MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name

DEAN KERKESNER

82 Street Address (P.O. Box Number is Not Acceptable)

15369 MYRTLE ST

83

84 City

FORT MYERS

FL

85 Zip Code

33908

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

Dean L. Kerknesner

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5-17-99

12. OFFICERS AND DIRECTORS

1.1 TITLE

D KERKESNER, CHARLES P.

STREET ADDRESS

6517 FURMAN BLVD

CITY-ST-ZIP

FORT MYERS FL

1.2 NAME

STREET ADDRESS

CITY-ST-ZIP

1.3 STREET ADDRESS

CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D DEAN L KERKESNER

STREET ADDRESS

15369 MYRTLE ST

CITY-ST-ZIP

FORT MYERS, FL 33908

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 I am not a Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dean L. Kerknesner

Date

4-29-99

CR2E034 (11/98)