## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

L31513

(9)

DOCUMENT #
1. Corporation Name LBK BOATHOUSE, INC.



Principal Place of		Mailing Address 7800 BAYBERRY RO	AD					
7800 BAYBERRY ROAD  JACKSONVILLE FL 32256  JACKSONVILLE FL			2256			Ta. Data	of Last Reg	oort I
					3. Date incorporated or Qualified 11/22/1989	Ja. Date	06/07/19	<u>95</u>
A Dischal Blace	of Pusiness	2a, Mailing Address			4. FEI Number	<u> </u>	L	pplied For
2. Principal Place	Final Principal						ot Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	tificate of Status Desired \$8.75 Additional Fee Required			
2		City & State		6. Election Campaign Financing \$5.00 May Be			May Be	
City & State		28			Trust Fund Contribution			to Fees
Zip	Country	Ζιρ	Counti	У	8. This corporation has liability for	intangible to i No	ax under s	199 032.
24	25	29	30]		Florida Statutes Yes  10. Name and Address of New I		Agent	
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Y	gioto.cu		
			Ľ.					
FULLER		8	2 Street Add	tdress (P.O. Box Number is Not Acceptable)				
7800 BAYBERRY ROAD JACKSONVILLE FL 32256				3				
VI IONIO			8	4 City		FI	<b>85</b> Zip	Code
			-	1 '	oration submits this statement for the punct of directors. I hereby accept the app	<u>FL</u>		- interest office
12.	gratine typotocymical mace of agricerous of OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO  Change	RS IN 12
THLE	DP REIN, WILLIAM F.	[] Ditte	1 1 1 H	ļ			_ ,	
NAME	7800 BAYBERRY ROAD			EET ADDRESS				
STREET ADDRESS CITY+S1+ZIP	JACKSONVILLE FL		1.4.010	r-ST ZIP				T Addison
TITLE	VP	DELETE	2 1 1:1	LF			Change	☐ Addition
NAME	CLABAUGH, JAMES		2.2 NAN					
STREET ADDRESS	201 GULF OF MEXICO DR. LONGBOAT KEY FL			HET ADDRESS				
DITY-ST-ZIP	DSTV	DELETE	3.11.1	Y - S1 - 74F			Change	roitibbA
TITLE	FULLERTON, ROBERT C.		3.2 NAI					
STREET ADDRESS	7800 BAYBERRY ROAD		33.81	HEET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL			Y-SI-71F			Change	Addition
TITLE		☐ DELETE	4 1 7:1					
NAME			4 2 NA	ME REET ADORESS				
STREET ADDRESS				Y S1-ZIP				
CITY-ST-ZIP TITLE		DELE IE	5 1 11				☐ Change	Addition
NAME			5 2 NA					
STREET ADDRESS			1	REET ADORESS				
C-TY-S1-ZIP		☐ DEL FTE	5 4 Ct	1Y - ST - ZIP			Change	☐ Addition
TITLE		LJ berit	62 NA	ľ				
NAME STREET ADDRESS				HELL ADDRESS				
CITY S1-7/P			€4€	TY - ST - ZIP	6 for the exemption stated in Section 1	10.07/20/02	Clorida Stat	utos I further
L 01 01 11	I		and object from I	done not ovali	tor the exemption stated in Section 1.	19.07(3)(K),	Figure and the	JOS. LIGHTING

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or is upplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if manager, or on an attaching with an address.

SIGNATURE: flatel

SIGNING OFFICER OR DIRECTOR