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 # M50079 1. Corporation Name

TEN - TEX BOATING., INC.

		_						
Principal Place of Business Mailing Address								
PO BOX 030163	PO BOX 030163							
FT LAUDERDALE FL 33303-0163 FT LAUDERDALE FL 33303-0163			63			DO NOT WRITE IN THIS	SPACE	
						Date Incorporated or Qualifed]
						04/10/1987		ſ
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
	lace of Edulinos	26				65-0002160		Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.7	5 Additional
22	.,,	27				5. Certificate of Status Desired	Fee	Required
City & State	e	City & State				6. Election Campaign Financing	\$5.0	0 May Be
23	28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Coun	try		8. This corporation owes the current year Ir		
24	25	29 30	0			Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent			 	10. Name and Address of New Registered	Agent	
Bull	A POPENT O		ľ	81 1	Vame			
RAWLS, ROBERT C.			1	82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	YACHT CLUB BLVD							
P.O. BOX 030163				83				
FT LAUDERDALE FL 33304			- 1	84 (City		85 Z	ip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the						FI		
SIGNATURE	m familiar with, and accept the obligation of the state o	and title if applicable. (NOTE: Re			gnature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
12.				1.1 TITLE		ADDITIONO/CHANGES TO CIT TOCKS A	Chang	
	RAWLS, ROBERT C.		1.2 NAW			•		
NAME			1.3 STR		ORESS	•		Ì
STREET ADDRESS			ł					
CITY-ST-ZIP TITLE			-	1.4 CITY-ST-ZIP 2.1 TITLE		-	☐ Chang	ge
	VID		l	2.2 NAME				
NAME	ACCOM VACUIT CLUB DI VID		2.3 STREET ADDRESS		IDRESS		•	
STREET ADDRESS			2.4 CIT					
CITY-ST-ZIP	TT EAGDERDALE TE 30007	☐ DELETE	3.1 TITLE		-	- 100 - 100	Chan	ge Addition
NAME		_	3.2 NAME					
STREET ADDRESS			3.3 STR		ORESS			
CITY-ST-ZIP			3.4. CIT			•		İ
TITLE		☐ DELETE	4.1 TITLE				☐ Chan	ge Addition
NAME			4, 2 NAME					}
STREET ADDRESS					DRESS			
CITY-ST-ZIP			4.4 CIT					1
TITLE		☐ DELETE	5.1 TITLE				. 🔲 Chan	ge Addition
NAME			5.2 NAM	ΛE				ł
STREET ADDRESS			5.3 STR	REETAD	DORESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-Z	JP			
TITLE	DELETE 6.		6.1 TITL	Æ			☐ Chan	ge 🔲 Addition
NAME	62		6.2 NAA	νE				}

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SESTACKIE M BATEMAN

FILED

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90073 013 ***158.75