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Secretary of State

NONPROFIT
CORPORATION,
ANNUAL REPORT
1998



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

DOCUMENT # **N12763** (1)
1. Corporation Name

MARINE INDUSTRIES ASSOCIATION OF PALM BEACH COUNTY, INC.

Principal Place of Business

Mailing Address

13205 US HWY ONE
SUITE 531
JUNO BEACH FL 33408
US

13205 US HWY ONE
SUITE 531
JUNO BCH FL 33408
US

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HALSTEAD, ROBERT DEFORD JR.
825 US HIGHWAY ONE
SUITE 262
JUPITER FL 33458

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **DOBBS, KELLY**
STREET ADDRESS **1037 MARINA DR**
CITY-ST-ZIP **NORTH PALM BCH FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **DANIELLO, LOU,**
STREET ADDRESS **10456 RIVERSIDE DR**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **S. D** ☐ DELETE
NAME **MORGAN, RICK**
STREET ADDRESS **112 LAKESHORE DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH FL**

3.1 TITLE **PRESIDENT** ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **MURRAY, JOSH**
STREET ADDRESS **98 LAKE DR**
CITY-ST-ZIP **PALM BCH SHORES FL**

4.1 TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **SPRAGUE, JOHN.**
STREET ADDRESS **108 OLD SLIP ROAD.**
CITY-ST-ZIP **RIVIERA BEACH FL**

5.1 TITLE **SECRETARY D** ☐ Change ☒ Addition
5.2 NAME **MARTIN MURPHY**
5.3 STREET ADDRESS **CRACKER BOY BOAT WORKS**
5.4 CITY-ST-ZIP **WEST PALM BEACH, FL 33404**

TITLE **D** ☐ DELETE
NAME **DOBBS, KELLY**
STREET ADDRESS **1037 MARINA DR**
CITY-ST-ZIP **N PAL BEACH FL**

6.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
6.2 NAME **GUY C. BISING**
6.3 STREET ADDRESS **13205 US HWY ONE, STE 531**
6.4 CITY-ST-ZIP **JUNO BEACH, FL 33408**

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

Lou Daniello, Treasurer 561/625-4484

CP2E037 (10/97)