

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90010 004 ***550.00

DOCUMENT # P01608

1. Entity Name
BOAT/U.S., INC.



Principal Place of Business

880 SOUTH PICKETT ST.
ALEXANDRIA, VA 22304

Mailing Address

880 SOUTH PICKETT ST.
ALEXANDRIA, VA 22304

44049947



07202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-1243944

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLETCHER, VIRGINIA L
3326-5 LAKESHORE BLVD.
JACKSONVILLE, FL 32210

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME OAKERSON, WILLIAM
STREET ADDRESS 9399 CROSS POINTE DR
CITY - ST - ZIP FAIRFAX STATION, VA

TITLE S
NAME VIGNEROT, ANN T.
STREET ADDRESS 2601 PARK CTR. DR. #C204
CITY - ST - ZIP ALEXANDRIA, VA

TITLE T
NAME CARD, DIANA F
STREET ADDRESS 12212 EDDYSTONE COURT
CITY - ST - ZIP LAKE RIDGE, VA 22192

TITLE CD
NAME SCHWARTZ, RICHARD
STREET ADDRESS 1401 N. OAK STREET
CITY - ST - ZIP ARLINGTON, VA

TITLE VPC
NAME CARD, DIANA F
STREET ADDRESS 12212 EDDYSTONE CT.
CITY - ST - ZIP WOODBRIDGE, VA 22192

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Diana F Card Diana F Card 7/23/04 703-823-9850