

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000142981

1. Entity Name
PEGASUS YACHT MANAGEMENT, INC



Principal Place of Business
2046 TREASURE COAST PLAZA
180
VERO BEACH, FL 32960

Mailing Address
2046 TREASURE COAST PLAZA
180
VERO BEACH, FL 32960

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



11072007 REIN P CR2E098 (1/07)

REINSTATEMENT

4. FEI Number
20-2656382

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOFF, STEP
1940 10TH AVE
C-1
VERO BEACH, FL 32961

Name

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

City

FL

Zip Code

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

Gisele C. Lannamann

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

(NOTE: Registered Agent signature required when reinstating)

12/17/07

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME LANNAMANN, KENNETH A
STREET ADDRESS 2046 TREASURE COAST PLAZA #180
CITY-ST-ZIP VERO BEACH, FL 32960 ☐ Delete

TITLE
NAME 600113298976
STREET ADDRESS 12/20/07--01009--011 **158.75
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME LANNAMANN, GISELE C
STREET ADDRESS 2046 TREASURE COAST PLAZA, # 180
CITY-ST-ZIP VERO BEACH, FL 32960 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Gisele C. Lannamann
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/17/07
Date

Daytime Phone #