

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

99 MAR -1 AM 10:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P03000001131**
 1. Corporation Name
PELAGIC SAILBOAT, INC

Principal Place of Business Mailing Address
8912 Eagle Watch Dr Same
Riverview FL 33569

2. Principal Place of Business 2a. Mailing Address
 21 **8912 EAGLE WATCH DR** 26 **Same**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 **Riverview FL** 28
 Zip 24 **33569** 25 Country 29 Zip 30 Country

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
01/07/1993
 4. FEI Number **65-0379032** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
 7. This corporation owes the current year Intangible Personal Property Tax Yes No
 10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
William B. Wiley Esq
215 S. Monroe St
Suite 600
Tallahassee FL 32301

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83 City
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature must be in Block 12)

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT [] DELETE
NAME	Edward C. Hoefle Hoefle
STREET ADDRESS	8912 Eagle Watch Dr
CITY-ST-ZIP	Riverview FL 33569
TITLE	VPO [] DELETE
NAME	PATRICK R. CORKELL
STREET ADDRESS	SAME AS ABOVE
CITY-ST-ZIP	
TITLE	STO [] DELETE
NAME	HORT SOPER
STREET ADDRESS	SAME AS ABOVE
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Add
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	[] Change [] Add
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[] Change [] Add
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[] Change [] Add
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[] Change [] Add
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[] Change [] Add
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

8000278808-8
-03/09/99-01031-009
******150.00 ****150.00**

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

SIGNATURE: **Edward C. Hoefle** Edward C. Hoefle 2/22/99 813/677-9481
 SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR Date Digitized File #

CR2E034 (11/98)