

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000002819

1. Entity Name
Y-NOT YACHTING CORPORATION



12 MAY 17 PM 11:11

Principal Place of Business
7412 15TH AVENUE NW
BRADENTON, FL 34209 US

Mailing Address
P. O. BOX 14624
BRADENTON, FL 34280 US



05042012 Chg-P CR2E034 (12/11)

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

4. FEI Number
65-0371328

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

WILLOCKS, CHERI M
7412 15TH AVENUE NW
BRADENTON, FL 34280

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

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 28, 2012

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

REMITTED BY MAY 1

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME NEAL, JUNE C
STREET ADDRESS 548 BOWSER ST
CITY- ST- ZIP ROCKDALE, TX 76567

TITLE PSD ☐ Delete
NAME WILLOCKS, CHERI M
STREET ADDRESS 7412 15TH AVENUE NW
CITY- ST- ZIP BRADENTON, FL 34280

TITLE D ☐ Delete
NAME RIGG, DWANE L
STREET ADDRESS 7412 15TH AVENUE NW
CITY- ST- ZIP BRADENTON, FL 34280

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 900235246649
CITY- ST- ZIP 05/17/12--01018--006 **150.00

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

E-MAIL ADDRESS

MAY 17 2012