

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P93000045185 (4)

1. Corporation Name

BALLYHOO BOAT RENTALS, INC.

Principal Place of Business
**TWELVE ROYAL PALM BLVD
VERO BEACH FL 32980**

Mailing Address
**TWELVE ROYAL PALM BLVD
VERO BEACH FL 32980**

FILED

95 APR 24 PM 12:09

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/21/1983

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3190389

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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MACINTYRE, BRUCE E
12 ROYAL PALM BLVD
VERO BEACH FL 32980**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MACTYRE, AMY J
STREET ADDRESS	12 ROYAL PALM BLVD
CITY - ST - ZIP	VERO BEACH FL 32980
TITLE	D
NAME	MACTYRE, BRUCE E
STREET ADDRESS	12 ROYAL PALM BLVD
CITY - ST - ZIP	VERO BEACH FL 32980
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V/D	☒ Change ☐ Addition
1.2 NAME	Wilkinson, Amy J.	
1.3 STREET ADDRESS	PO BOX 4118	
1.4 CITY - ST - ZIP	VERO BEACH, FL 32904	
2.1 TITLE	P/D	☒ Change ☐ Addition
2.2 NAME	MacIntyre, Bruce E.	
2.3 STREET ADDRESS	921 Bahia Mar Road	
2.4 CITY - ST - ZIP	VERO BEACH, FL 32963	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce MacIntyre

Chair

Signature Number 8

(407) 562-7724