

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 7:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000051486 (7)**

1. Corporation Name

MARINO BOATS, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/14/1993** 3a. Date of Last Report **05/01/1994**

4. FET Number **59-3197973** 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 complies with the provisions of Chapter 319, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. # etc.

22. City & State

23. Zip

2a. Mailing Address

26. Suite, Apt. # etc.

27. City & State

28. Zip

9. Name and Address of Current Registered Agent

**GYLLENBERG, NILS S
1157 N DIXIE FREEWAY
NEW SMYRNA BEACH FL 32168**

10. Name and Address of New Registered Agent

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 607.06(4) 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 hereby sworn and accept the obligations of Section 607.06(4), Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent required when name change)

(Signature of New Registered Agent required when name change)

(Signature of Officer or Director required when name change)

12. OFFICERS AND DIRECTORS

101. NAME **D GYLLENBERG, NILS S**
102. STREET ADDRESS **1157 N DIXIE FREEWAY**
103. CITY, ST, ZIP **NEW SMYRNA BEACH FL 32168**

104. NAME
105. STREET ADDRESS
106. CITY, ST, ZIP

107. NAME
108. STREET ADDRESS
109. CITY, ST, ZIP

110. NAME
111. STREET ADDRESS
112. CITY, ST, ZIP

113. NAME
114. STREET ADDRESS
115. CITY, ST, ZIP

116. NAME
117. STREET ADDRESS
118. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

131. NAME ☐ Change ☐ Addition

132. NAME

133. STREET ADDRESS

134. CITY, ST, ZIP

135. NAME

136. STREET ADDRESS

137. CITY, ST, ZIP

138. NAME

139. STREET ADDRESS

140. CITY, ST, ZIP

141. NAME

142. STREET ADDRESS

143. CITY, ST, ZIP

144. NAME

145. STREET ADDRESS

146. CITY, ST, ZIP

147. NAME

148. STREET ADDRESS

149. CITY, ST, ZIP

150. NAME

151. STREET ADDRESS

152. CITY, ST, ZIP

153. NAME

154. STREET ADDRESS

155. CITY, ST, ZIP

156. NAME

157. STREET ADDRESS

158. CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in New Section 190.01(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 319, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GYLLENBERG

4/30/95

(004) 423 3812