

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P93000064421 (9)

1. Corporation Name

PALM BEACH MARINE SALES INC.

Principal Place of Business

353 S. U.S. 1
SUITE E-402
JUPITER FL 33477

Mailing Address

353 S. U.S. 1
SUITE E-402
JUPITER FL 33477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/10/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0436572

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

21 18079 LAKE BEND DRIVE

2a. Mailing Address

26 18079 LAKE BEND DRIVE

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State
JUPITER FL

28 City & State
JUPITER FL

24 Zip
33458

Country

29 Zip
33458

Country

9. Name and Address of Current Registered Agent

BETTS, MICHAEL J
353 S. U.S. 1
SUITE E-402
JUPITER FL 33477

10. Name and Address of New Registered Agent

81 Name

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

18079 LAKE BEND DRIVE

83

84 City

JUPITER

FL

85

Zip Code
33458

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 of registered agent, if registered agent and board applicable)

(Signature of registered agent, if registered agent and board applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

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STREET ADDRESS

CITY ST ZIP

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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

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

15 TITLE ☐ Change ☐ Addition

16 NAME

17 STREET ADDRESS

18 CITY ST ZIP

19 TITLE ☐ Change ☐ Addition

20 NAME

21 STREET ADDRESS

22 CITY ST ZIP

23 TITLE ☐ Change ☐ Addition

24 NAME

25 STREET ADDRESS

26 CITY ST ZIP

27 TITLE ☐ Change ☐ Addition

28 NAME

29 STREET ADDRESS

30 CITY ST ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

35 TITLE ☐ Change ☐ Addition

36 NAME

37 STREET ADDRESS

38 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 119.07(3)(b), 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:

Michael J. Betts

MICHAEL J. BETTS

6/9/95

407-743-5835

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Signature Printed Name)