

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

5 MAY -1 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000072940 (8)

1. Corporation Name

TRADEWIND YACHTS, INC.

Principal Place of Business

1390 MAIN STREET
SARASOTA FL 34236
US

Mailing Address

1390 MAIN STREET
SARASOTA FL 34236
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/14/1993

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0462917

Applied For

Not Applicable

Street Address

Street Address

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

22

27

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

23

28

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, DARYL J
1800 SECOND STREET
STE. 720
SARASOTA FL 34236

81. Name

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

1819 MAIN STREET

83

SUITE 1100

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.01(1) and 607.15(1) 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 607.01(1), Florida Statutes.

SIGNATURE

(Signature of Agent or Registered Agent, if not a natural person, the name of the individual who is the agent)

(Signature of Registered Agent, if not a natural person, the name of the individual who is the agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PTD
2. NAME	GRIFFIN, WILLIAM D
3. STREET ADDRESS	1390 MAIN STREET
4. CITY & STATE	SARASOTA FL
5. TITLE	V
6. NAME	HAMMEL, EDWARD J
7. STREET ADDRESS	1390 MAIN STREET
8. CITY & STATE	SARASOTA FL
9. TITLE	VS
10. NAME	HALLOY, RICHARD A
11. STREET ADDRESS	1390 MAIN STREET
12. CITY & STATE	SARASOTA FL
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY & STATE		
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY & STATE		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY & STATE		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY & STATE		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY & STATE		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am not capable for the exceptions stated in law (see 199.032, Florida Statutes). I further certify that the information and officers listed on this statement are not subject to any criminal or civil penalties and are not subject to any civil penalties under Chapter 199, Florida Statutes. I am familiar with and accept the obligations of Section 607.01(1), Florida Statutes, and that my name appears on Block 12 or Block 13 of this statement as an officer or director of the corporation.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward Hammel

4/28/95

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