

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 23 PM 3:19

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000073284 (0)**

1. Corporation Name

SOUTHEAST YACHTING SCHOOL & CHARTERS, INC.

2. Principal Place of Business

2170 S.E. 17TH STREET
SUITE 304
FORT LAUDERDALE FL 33316

2a. Mailing Address

2170 S.E. 17TH STREET
SUITE 304
FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/21/1993

3a. Date of Last Report
08/01/1994

4. FEI Number
65-0452504

Applied For
 Not Applicable

5. Certificate of Status Delivered

\$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. 190.032 Florida Statutes Yes No

21. Principal Place of Business

22. State, Apt #, etc.

23. City & State

24. St.

25. County

2a. Mailing Address

27. State, Apt #, etc.

28. City & State

29. St.

30. County

9. Name and Address of Current Registered Agent

**STURRUP, ROBERT M
2601 E OAKLAND PARK BLVD.
SUITE 503 - ADAMS BUILDING
FORT LAUDERDALE FL 33306**

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statute, the above named corporation submits the 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 signing with and accept the provisions of Sections 607.0508, Florida Statute.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

86

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)

TYPE

NAME

STREET ADDRESS

CITY & STATE

TYPE

NAME

STREET ADDRESS

CITY & STATE

TYPE

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CITY & STATE

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NAME

STREET ADDRESS

CITY & STATE

SIGNATURE: *Carolyn L. Williams* Carolyn L. Williams April 25, 1995 (305) 523-2628

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sec'y-Treas. Director