

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PH 4:38

DOCUMENT # **P94000002998 (0)**

1. Corporation Name

TROPHY BOX CHARTERS, INC.

Principal Place of Business

505 S. FLAGLER DR.
SUITE 1100
WEST PALM BEACH FL 33402

Mailing Address

P.O. BOX 3475
WEST PALM BEACH FL 33402

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/30/1993

3a. Date of Last Report
04/01/1994

4. FEI Number
65-0456474

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.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCCRACKEN, JOHN B
505 S. FLAGLER DR.
SUITE 1100
WEST PALM BEACH FL 33402

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PTD
FIELDS, ALAN
4880 SAND DUNE CIRCLE, APT. 108
WEST PALM BEACH FL 33417**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☒ Change ☐ Addition

**P.O. Box 18863 N/A
GREENSBORO, N.C. 27419**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VSD
INGRAM, GRAY
P.O. BOX 18863 N/A
GREENSBORO NC 27419**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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:

Gray V. Ingram
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/95 (P10) 668-3347
(Date) (Signature)

PA4000002998

JONES, FOSTER, JOHNSTON & STUBBS, P.A.

ATTORNEYS AND COUNSELORS
FLAGLER CENTER TOWER
808 SOUTH FLAGLER DRIVE
ELEVENTH FLOOR
P. O. BOX 3478

WEST PALM BEACH, FLORIDA 33402-3478
(407) 868-3000
FAX: (407) 832-1484

LARRY B. ALEXANDER
STEPHEN J. AUCAMP
TRACEY BAGGOTT
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JOYCE A. CONWAY
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REBECCA D. DOANE
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PETER S. HOLTON
MARK S. KLEINFELD
MICHAEL T. KRANZ

JOHN BLAIR MCCracken
SCOTT L. MARSHALL
JOHN C. MARSHALL
JOHN C. RAI
ANDREW ROSS
STEVEN J. ROTHMAN
PETER A. SACHS
D. CLAUDE SMITH III
RODNEY A. STUBBS, JR.
ALLEN R. TOMLINSON
JOHN B. TRIMPER
MICHAEL P. WALSH
H. ADAMS WEAVER

WRITER'S DIRECT LINE: _____

HENRY F. LUENTHAL
1929-1982
HARRY ALLISON JOHNSTON
1896-1983
R. BRUCE JONES
1904-1988
PAUL C. WOLFE
1930-1981
RETIRED
WILLIAM A. FOSTER
OF COUNSEL
L. MARTIN FLANAGAN

March 29, 1995

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 1500
Tallahassee, Florida 32302-1500

Gentlemen:

Re: Trophy Box Charters, Inc.

The Annual Report for Trophy Box Charters, Inc., is re-submitted herewith, along with the corporation's check number 1108 in the amount of \$200.00, for filing.

Please note that the notation "N/A" has been added to the mailing address of Mr. Fields as there is no street address for him.

Sincerely yours,

JONES, FOSTER, JOHNSTON & STUBBS, P.A.

By

John B. McCracken
John B. McCracken

JBM:sw\Misc\Trophy.L1
Enclosures