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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P9400006737 (8)

DANIA BOAT YARD, INC.

Principal Place of Business

46 00/411 0040

Mailing Address

40 DOVAN DOAD

FILED Apr 29 1996 8:00 am Secretary of State



10 BRYAN ROAD DANIA FL 33004		DANIA FL 33004	DANIA FL 33004				
					3. Date Incorporated or Qualified 01/27/1994	3a. Date of Last F 05/01/1	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	\vdash	Applied For
21		26	26		65-0462744		Not Applicable
Suite, Apt. #	l, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	T	5 Additional Required
City & State		City & State	├ ¬ '		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip Gountry		Zip	Zip Country		8. This corporation has liability for i	intangible tax under s	199.032,
24	25	29	30			□No	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New R	tegistered Agent	
10 BRY	, FRANCIS E 'AN ROAD		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	vie)	
DANIA	FL 33004		8	3			
			8	4 City		FL 85 Z	ip Code
or registere	o the provisions of Sections 607.00 ad agent, or both, in the State of F h, and accept the obligations of, S	lorida. Such change was author	ized by the cor	named corporation's bo	oration submits this statement for the pur ard of directors. I hereby accept the appe	rpose of changing its ointment as registered	registered office d agent. I am
SIGNATURE _	Signature, typed or printed name of registered a	gent and title if applicable (A	NOTE: Registered Aç	jent signature requir	ed when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	ORS IN 12
TITLE	Р	☐ DELETE	1. 1 TITL	E		Change	Addition
NAME	FLYNN, FRANCIS E		1.2 NAM	E			
STREET ADDRESS	10 BRYAN ROAD		13 STRE	ET ADDRESS			
CITY - ST - ZIP	DANIA FL 33004		1.4 C/TY	-ST-ZIP			
TITLE		DELETE	2 1 TITL			Change	☐ Addition
NAME			2.2 NAM	E			
STREET ADDRESS			•	ET ADDRESS			
CITY-ST-ZIP		C Priere	2.4 CITY			☐ Change	Addition
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NAME			3.2 NAM				
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NAME			1				
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CITY-ST-ZIP		DELETE	5. 1 71TL	-ST-ZIP		Change	[] Addition
TITLE			5.2 NAM	· .			
NAME				ET ADDRESS			
STREET ADDRESS			5.4 CITY				
CITY-ST-ZIP TITLE		☐ DELETE	6 1 TITL			☐ Change	Addition
NAME			62 NAM				_
STREET ADDRESS				ET ADDRESS			
CITY - ST - ZIP				-ST-ZIP			
O(11.21.7IL			0.7 0111	W. F			

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)(k), 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.

April 22,96 (954)925-7074

Davt me Phone #