

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

CORPORATION ANNUAL REPORT 1995

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



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
DIVISION OF CORPORATIONS

95 MAR 10 PM 12:45

DOCUMENT # P94000013398 (0)

1. Corporation Name

TEN THOUSAND ISLANDS AIRBOAT TOURS, INC.

Principal Place of Business

405 FIFTH AVENUE SOUTH  
NAPLES FL 33940

Mailing Address

405 FIFTH AVENUE SOUTH  
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 405 Fifth Avenue So.

2a. Mailing Address

26 405 Fifth Avenue South

22 Suite 6

27 Suite 6

23 NAPLES FL

28 NAPLES, FL

24 33940

25 U.S.A.

29 33940

30 U.S.A.

3. Date Incorporated or Qualified

02/15/1994

3a. Date of Last Report

4. FEI Number

Applied For  
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent

ANTARAMIAN, JACK J  
405 FIFTH AVENUE SOUTH  
NAPLES FL 33940

10. Name and Address of New Registered Agent

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

*Jack J. Antaramian*

2/27/95

Signature of present holder of registered agent and title if applicable.

NOTE: Registered Agent signature required when re-registering.

DATE

12. OFFICERS AND DIRECTORS

TITLE: PRESIDENT  
NAME: JACK J. ANTARAMIAN  
STREET ADDRESS: 405 5th Ave. So., Ste. 6  
CITY-ST-ZIP: NAPLES, FL 33940

TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 110.07(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 (changed), or on an attachment with an address.

SIGNATURE:

*Jack J. Antaramian*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/95 (813) 434-0600

DATE

TELEPHONE NUMBER