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FILED  
May 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000050118 (6)

1. Corporation Name

EDGEWATER YACHT SALES, INC.

Principal Place of Business

Mailing Address

OYSTER BAR RESTUARANT-MARINA  
13690 OLD RIVER RD.  
PENSACOLE FL 32507  
US

OYSTER BAR RESTAURAT-MARINA  
13690 OLD RIVER RD.  
PENSACOLA FL 32507  
US

3. Date Incorporated or Qualified

07/01/1994

3a. Date of Last Report

08/12/1996

4. FEI Number

59-2895228

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

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PETRO, EMILE T II  
5030 SHOSHONE DRIVE  
PENSACOLA FL 32507

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME PETRO, EMILE T II  
STREET ADDRESS 14100 RIVER RD, APT. 137  
CITY-ST-ZIP PENSACOLA FL

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 5030 Shoshone Dr.  
1.4 CITY-ST-ZIP Pensacola, FL 32507

TITLE V ☐ DELETE  
NAME PETRO, EMILE T III  
STREET ADDRESS 500 CHANTERELLE, DRIVE  
CITY-ST-ZIP PENSACOLA FL 32508

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 5030 Shoshone Dr.  
2.4 CITY-ST-ZIP Pensacola, FL 32507

TITLE ST ☐ DELETE  
NAME PETRO, ZOE CLAIRE  
STREET ADDRESS 5030 SHOSHONE DRIVE  
CITY-ST-ZIP PENSACOLA FL 32507

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Emile T. Petro, Jr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EMILE T. PETRO, JR.

Date

4-30-97

Daytime Phone #

904-492-2588

0514577

CR2E034 (9/96)