

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

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AND
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95 MAY -1 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
* ANNUAL REPORT
1995



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

DOCUMENT # P94000082886 (0)

1. Corporation Name

ISLAND SKIFF, INC.

Principal Place of Business

1751 NEVADA AVE NE
ST PETERSBURG FL 33703

Mailing Address

1751 NEVADA AVE NE
ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1994

3a. Date of Last Report

2. Principal Place of Business

21 1751 Nevada Ave NE

2a. Mailing Address

26 1751 Nevada Ave NE

4. FEI Number

59-3300240

Applied For

Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 St. Petersburg, FL

City & State

28 St. Petersburg, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 33703

Country

25 USA

Zip

29 33703

Country

30 USA

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

9. Name and Address of Current Registered Agent

HENNINGER, JOHN A
2037 FIRST AVE N
ST PETERSBURG FL 33713

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(403) Registered Agent signature has and when recording:

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WOOD, DEBORAH A
STREET ADDRESS 1751 NEVADA AVE NE
CITY, ST, ZIP ST PETERSBURG FL 33703

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
600001473166
-05/04/95--01005--007
****225.00 ****225.00

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 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 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:

Deborah A. Wood, Director

5/2/95

813-896-6633