FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

CAPTAIN J					
Principal Place of Business		Mailing Addre	11001100111		
P.O. BOX 276 CORTEZ FL 32415		P.O. BOX 276 CORTEZ FL 3			
	3. Date Incorp. 01/12/19				
2. Principal Place o	of Business	2a. Mailing Ad	4. FEt Number		
21		[26]	65-0587		
Suite, Apt. #, etc. 22 City & State 23		Suite, Apt.	5. Certificate o		
		City & State	6. Election Car Trust Fund (
Zip 24	Country 25	Z(μ)	Country 30	8. This corpora Personal Pro	

FILED May 28 1998 8:00am Secretary of State

1	IN JOHN BOAT COMPANY)0003760 (2 ⁽)			1
Principal Plac	ce of Business	Mailing Address			-\	ERIGO IIIII IRDIR DIKID BOIR IODI
P.O. BOX 276		P.O. BOX 276				
CORTEZ FL	32415	CORTEZ FL 32415			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	is stace
					01/12/1995	
2. Principal F	Place of Business	2a. Mailing Address			4. FEt Number	Applied For
21		[26]			65-0587589	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stat	de	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζ(p)	Country 30		This corporation owes or has paid the e Personal Property Tax due June 30.	
	9. Name and Address of Curre				10. Name and Address of New Registere	
BE	ILL, CALVIN E		81 N	lame		
12:	203 45TH AVE. W.		82 S	treet Addre	ess (P.O. Box Number is Not Acceptable)	
CC	ORTEZ FL 34215					
			83			
			84 C	ity		85 Zip Code
44 Purcuant	to the maniping of Continue COV Of	00 and 007 4000 En day Out			Foration submits this statement for the purpose	
agent ta SIGNATURE	m ramiliar with, and accept the obli Signature, typed or proted name of rejectered a	gations of, Section 607.0505, F	in authorized by the lorida Statutes. It Registered Agent set 13.		d when reinstained DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TIFLE	Т	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	BELL, CALVIN E	L	1.2 NAME			
STREET ADDRESS	4600 124TH ST. WEST		1.3 STREET ADDI	BESS		
CITY-ST-ZIP	CORTEZ FL 34215		1.4 CITY- ST-ZIF			
TITLE		DELE TE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADD	RESS		
CITY-ST-ZIP			2 4 CITY - \$1 - ZI	Р		
TITLE		☐ DELETE	3 1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDR	RESS		ł
CITY-ST-ZIP		Distre	3.4 CITY - ST - ZII	Р		
TITLE		☐ DELETE	4.1 1111.8			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDE			
CITY-ST-ZIP TITLE		DELETE	5.1 TILLE	<u>, </u>		Change Addition
NAME		[5.1 THEE 5.2 NAME			CHAINGE THE WORKINGO
STREET ADDRESS			5.3 STREET ADDR	nece		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			- ·
STREET ADDRESS			6.3 STREET ADDR	RESS	2000025441 -06/02/98010310	当。 2. ど の
CITY CT TID			5.5 STRE 7 HODE		_novingvacuming1r	.co 1 <i>XI</i> ⊥

14. Thereby 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 atlantment with an address.

1/10/10