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PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State 4 DIVISION OF CORPORATIONS

FILED

97 JUN 27 PM 3: 22

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LAKE JEM AUTO & MARINE SALES, INC.

Principal Place of Business Mailing Address PO Box 905 7001 CADLER-ED 7831 BADLER RD TANGERINE FL 02777 TANGERINE FL 32777 32768 3. Date Incorporated or Qualified 3a. Date of Last Report 02/03/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3296279 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation has liability for intangible tax under s. 199,032, ☐ Yes ☐ No Florida Statutes 24 25 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KELLEY, GARLA Street Address (P.O. Box Number is Not Acceptable) 2767-W GTATE RD 484 82 · LONGWOOD FL 82779 83 84 02 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agricults of Saction 607,0505, Florida Statutes. Pursuant to the provisions of Sections 607.0 office or registered agrint of both in the Stragent. I am familiar with 400 accept the other SIGNATURE nd title d applicable (NOTE Registered Agent signature required when reinstating) ICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE DUPUIS, GARY NAME 1.2 NAME 7931 Sadler Road P:0: BOX 905 STREET ADDRESS 1.3 STREET ADDRESS PLYMOUTH FL-32768> Tangenine FL 32777 CITY-ST-ZIP 1.4 CITY - ST - 7(P DELETE Change Addition 2.1 11116 TITLE NAME 2 2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-2/P 2. 4 CITY - ST- ZIP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 \$1REE1 ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Add:tion TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE G.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

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6.4 CHY - \$1 - 7(P) 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 writer 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 eath; that I am an officer or director of the companion or the receiver of trustee empowered to execute this report as required by Chapter 607, Forida Statutes; and that my name appears in Block 12 or Block 13 it granged, or an attachment with an address.