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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

SIGNATURE:

## DOCUMENT # P95000038848 (4)

LARRY'S MARINE CENTER, INC.

Principa! Place	e of Business	Mailing Address	Mailing Address		- T TOOLSOOK OLD HONDL ORELL BOTTL DOLLL BOLLE BOLLD TITLE TOTAL HOUSE TELL TOOK	
3826 HIGHWAY 441 SE OKEECHOBEE FL 34974			3826 HIGHWAY 441 SE OKEECHOBEE FL 34974-7222			
					3. Date Incorporated or Qualified 05/15/1995	3a. Date of Last Report 01/26/1996
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0587810	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζip	Country	Zip	Country		8. This corporation has liability for in	
24	25	29	30			Yes No
DIO.	9. Name and Address of Cu	rrent Registered Agent	81	Name	10. Name and Address of New Rec	istered Agent
	IARDSON, LARRY E		\ <b>°</b> '\	Name		
3826 HIGHWAY 441 SE OKEECHOBEE FL 34974			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)
UNE.	ECHODEE PL 34974		83		· · · · · · · · · · · · · · · · · · ·	
				·····		
ļ			84	City		FL 85 Zip Code
office or r agent I a	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	State of Florida Such change working attentions of, Section 607.0505	as authorized by t , Florida Statutes.	the corporation	oration submits this statement for the pi on's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
12.		Ed agent and fille Lappicable. (  S AND DIRECTORS	(NOTE: Registered Agent	signature require	ADDITIONS/CHANGES TO OFFIC	
TIFLE	D	DELETE			ADDITIONAJORANGES TO OFFIC	Change Addition
NAME	RICHARDSON, LARRY E		1.2 NAME			
STREET ADDRESS	ANA NE AATU OTOCET		1.3 STREET ADDRESS			
CITY-ST-7/P	OKEECHOBEE FL 34972		1.4 CITY-ST-	1	•	
TITLE	D	DELETE	21 TITLE			Change Addition
NAME	OLOUADDOON LINDA I		2.2 NAME			,
STREET ADDRESS	404 NC 44TH OTDEET		2 3 STREET A	DDRESS		£
CITY-ST-ZIP	OKEECHOBEE FL 34972		2. 4 City - St		•	
TOLE			3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET A	DDRESS		.4.
CITY-ST-ZIP			3.4. CITY - ST	- ZIP		
TITLE	DELETE		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS	16		4.3 STREET A	DDRESS		
CITY-ST-ZIP			4.4 CITY - ST	- ZIP		
TITLE			5 1 TITLE			Change Addition
NAME			5.2 NAME	-		
STREET ADDRESS			5.3 STREET A	DDAESS		
CITY - ST - 7IP			5.4 CITY-ST-	ZIP		
THILE	H	☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET A	DDRESS		

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.