

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000072441 (5)**

1. Corporation Name

PATTEN YACHT SALES, INC.



Principal Place of Business

**5388 GATELAKE ROAD
FT. LAUDERDALE FL 33319**

Mailing Address

**5388 GATELAKE ROAD
FT. LAUDERDALE FL 33319**

3. Date Incorporated or Qualified
09/19/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

21 2260 S E 17th St
Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

65-0608228

Applied For
Not Applicable

22 City & State

23 Ft Lauderdale, FL

27 City & State

28 City & State

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

24 33316 **25 USA**

29 **30**

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

9. Name and Address of Current Registered Agent

**STRICKLAND, CLAUDE J
5388 GATELAKE ROAD
FT. LAUDERDALE FL 33319**

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 of person authorized to sign on behalf of the corporation

Printed Name of Registered Agent (Signature optional when registering)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE
11 **D**
NAME **STRICKLAND, CLAUDE J**
STREET ADDRESS **5388 GATELAKE ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33319**

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
11 **D**
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition
21 **D**
NAME **Patten, Forest**
STREET ADDRESS **303 Wetherell Street**
CITY-ST-ZIP **Manchester, CT 06040**

☐ Change ☐ Addition
31 **D**
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
41 **D**
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
51 **D**
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
61 **D**
NAME
STREET ADDRESS
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)(k), 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:

Claude J. Strickland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/96
DATE

954-462-6003
Toll-Free Phone

CR2E034 (12/95)