## 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

P96000001508 (6) DOCUMENT #

BUCKLEY'S YACHT SALES, INC.

Principal Place of Business 777 S FEDERAL HWY #103-C POMPANO BEACH FL 33062

Mailing Address

777 S FEDERAL HWY #103-C POMPANO BEACH FL 33062

## **FILED** Jan 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0646949 Not Applicable 26 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 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BUCKLEY, THOMAS W 777 S FEDERAL HWY #103-C Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33062 83 City Zip Code 85 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 faprily with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE BUCKLEY, THOMAS W 12 NAME NAME CR2E034 77 S.FED. HWY., #103C STREET ADDRESS. 1.3 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Addition Change TITLE 2.1 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-7IP CITY-ST-ZIP Addition DELETE Change TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition | Change TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition TITLE DELETE 6.1 TITLE Change

14. I 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY - ST - ZIP

Transco Il Buckles HED

113/98 954-943-7799