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FILED  
May 13 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000041166 (5)

1. Corporation Name  
ATLANTIC COASTAL CRUISES, INC.

Principal Place of Business  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH FL 33401

Mailing Address  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH FL 33401-5980



2. Principal Place of Business  
21 900 East Blue Heron Blvd  
Suite, Apt. #, etc.  
22  
City & State  
23 Singer Island, Fl  
Zip  
24 33404  
Country USA  
25 Palm Beach  
26 900 East Blue Heron Blvd  
Suite, Apt. #, etc.  
27  
City & State  
28 Singer Island, Fl  
Zip  
29 33404  
Country USA  
30 Palm Beach

3. Date Incorporated or Qualified  
05/09/1996  
3a. Date of Last Report  
4. FEI Number  
45-066-93-65  
Applied For  
Not Applicable  
5. Certificate of Status Desired  
X  
\$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution  
X  
\$5.00 May Be  
Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes  
X Yes ☐ No

9. Name and Address of Current Registered Agent  
ALEXANDER, LARRY B  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent  
81 Name  
Hugh D. Claughton Jr.  
82 Street Address (P.O. Box Number is Not Acceptable)  
900 East Blue Heron Blvd  
83  
84 City  
Singer Island, FL  
85 Zip Code  
33404

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 607.1505, Florida Statutes.

SIGNATURE: *Hugh D. Claughton Jr.* Hush D Claughton Jr, President. 4-23-97  
Signature of the person named as registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
1. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
CLAUGHTON, HUGH D SR.  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH FL 33401  
DELETE  
2. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
3. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
4. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
5. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE  
6. TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
President; Board of Directors  
Hugh D. Claughton Sr.  
900 East Blue Heron Blvd  
Singer Island, Fl, 33404  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Secretary-Treasurer; Board of Directors  
Hugh D. Claughton Sr.  
900 East Blue Heron Blvd  
Singer Island, Fl, 33404  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
Board of Directors  
Jonathan Claughton  
900 East Blue Heron Blvd  
Singer Island, Fl, 33404  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE: X *Hugh D. Claughton Jr.* Hush D Claughton Jr 4-23-97 (561) 8248-7827  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)