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

DOCUMENT # P9600063278 (1)

VERO BEACH BOAT DEPOT, INC.

Principal Place of Business

Mailing Address

FILED May 13 1998 8:00am Secretary of State



1580 US 1 SEBASTIAN F US	FL 3295 8	P.O. BOX 780327 SEBASTIAN FL 32958 US			DO NOT WRITE IN TH	IIS SPACE		
					 Date Incorporated or Qualified 07/26/1996 			
	Place of Business FNDIAN RIVER DR	26 PO Boy 780327		4. FEI Number 65-0694340	Applied For			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	0032			\$8	Not Applicable 75 Additional	
22		27			5. Certificate of Status Desired	,	ee Required	
235 BASTLAN, PL		City & State 28 SEBASTIAN, PL		Election Campaign Financing Trust Fund Contribution	ing \$5.00 May Be Added to Fees			
<u>24 3 29 s</u>	18 25 U.S.A	1	Countr	ŠA	This corporation owes or has paid the Personal Property Tax due June 30.	Yes	ar Intangible	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ORF GREGORY I 81 Name								
GORE, GREGORY J 709 WASHINGTON STREET								
SEBASTIAN FL 32958			82	Street A	Address (P.O. Box Number is Not Acceptable)			
	- -		83	1				
			84	City		85	Zip Code	
dd Dawn	40 0070100	1007 (500 5)			F		· '	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 typed or profed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND D		13.	ion angricular i	ADDITIONS/CHANGES TO OFFICERS A		TORS IN 12	
TITLE	PVST	DELETE	1.1 TITLE			☐ Cha		
NAME	GRAHAM, JOSEPH		1.2 NAME					
STREET ADDRESS	2420 HAMPTON BRIDGE ROAD		1.3 STREE	T AODRESS				
CITY-ST-ZIP	DELRAY BEACH FL 33444		1.4 CiTY-	ST-ZIP				
TITLE	D Graham, Joseph	☐ DÉLETE	2.1 TITLE			Cha	inge L Addition	
NAME	2420 HAMPTON BRIDGE ROAD		2.2 NAME					
STREET ADDRESS	DELRAY BEACH FL 33444		1	T ADDRESS				
CITY-ST-ZIP TITLE	The state of the s	☐ DELETE	2.4 CITY- 3.1 TITLE	S1- ZIP		Cha	nge Addition	
NAME			3.2 NAME	1		G/A	ingt	
STREET ADDRESS			i i	T ADDRESS				
CITY-ST-ZIP			3.4 CITY-					
TITLE		DELETE	4.1 TITLE			Cha	nge Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY-ST-ZIP			4.4 CITY-3	S1 - ZIP			i	
TITLE		DELETE	5 1 THLE			☐ Cha	nge 🔲 Addition	
NAME			5 2 NAME					
STREET ADDRESS			5.3 STREET	I ADDRESS]	
CITY-ST-ZIP		DOLLET	5.4 CITY-5	ST - ZIP		——————————————————————————————————————		
TITLE		☐ DELETE	6.1 TITLE			∐ Chai	nge L Addition	
NAME CTREET APPRICE			6.2 NAME					
STREET ADDRESS			6.3 STREET	i				
14. I hereby co	ertify that the information supplied with	this filing does not qualify for	6.4 CITY-5		in Section 119.07(3)(i), Florida Statutes. I further	cortify that	t the information	
officer or o	on this annual report or supplemental ar director of the corporation or the receive or Block 13 if changed, or on an atlay fin	nnual report is true and accu it or truster empowered to ex	rate and the recute this	at my sign report as r	ature shall have the same legal effect as if made required by Chapter 607, Florida Statutes; and the	under oath	t tha information t; that I am an appears in	