FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT DE STAT

Sandra B. Morti am

Secretary of State
DIVISION OF CORPORATIONS

FILED May 26 1998 8:00am Secretary of State

DOCUMENT # P9600085099 (5)

Principal Plac	Y BOAT CENTERS, INC. e of Business wee BLOSSOM TR	Mailing Address 2476 S ORANGE BLOSSI APOPKA FL 32703 US	OM TR	DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	
				10/11/1996	
2. Principal P	lace of Business	2a. Mailing Address	······································	4. FEI Number	Applied For
21		26		59-3407916	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		C. Floating Company Financias	
23	v	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	70	Country	This corporation owes or has paid the city	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	i Agent
WARREN, WILLIAM L II					
2321 SWEETAIR COURT			B2 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
APOPKA FL 32712 A3A1 Sweetaire Cour					
			83		į
			84 City		85 Zip Code
				FI	L
11. Pursuant	to the previsions of Sections 607.05 egistered agent, or both, in the Stat.	02 and 607-1508, Flori da Statut e e of Florida, Such cha nge wa s a	es, the above-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing its registered incomment as registered
agent. I a	m familiar with, and accept the oblig	gations of Section 607.0505, Fig	orida Statutes.	ration a board of differences. The long account the ap-	ponkinom ao regiotorea
SIGNATURE					
	Signature, typed or pented name of registered as	gent and time if applicable (NOTI ND DIRECTORS	flegistered Agent signature res		ID DIDECTORS IN 12
12. TITLE	D (mileting Mi	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	WARREN, WILLIAM L II	C	1.2 NAME		gg change gg yaarton
STREET ADDRESS	2321 SWEETYAIR COURT		1.3 STREET ADDRESS	2321 Sweetoire Court	
CITY-ST-ZIP	APOPKA FL 32712		1.4 CITY- ST- ZIP	action of the control	
TITLE	D	DELETE	2.1 TiTLE		Change Addition
NAME	NUSS, GARY J		2.2 NAME		
STREET ADDRESS	107 BLUE SPRUCE COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	SANFORD FL 32771		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS	•		4 3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELET€	5.1 TITLE		Change Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		OFIFE	5.4 CITY-ST-ZIP		——————————————————————————————————————
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		

14. Thereby 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 empoyed and 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

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