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FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000102341 (0)

1. Corporation Name

PANACHE BOAT CONSORTIUM, INC.

Principal Place of Business

50 NORTH LAURA STREET
SUITE 3900
JACKSONVILLE FL 32202

Mailing Address

50 NORTH LAURA STREET
SUITE 3900
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

59-3421501

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAMILTON, LAWRENCE J III
50 NORTH LAURA STREET
SUITE 3900
JACKSONVILLE FL 32202

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME HAMILTON, LAWRENCE J
STREET ADDRESS 50 NORTH LAURA STREET, SUITE 3900
CITY-ST-ZIP JACKSONVILLE FL 32202

1.1 TITLE ☐ Change ☐ Addition

TITLE DS ☐ DELETE

NAME ROBERTS, CHAD S
STREET ADDRESS 50 NORTH LAURA STREET, SUITE 3900
CITY-ST-ZIP JACKSONVILLE FL 32202

2.1 TITLE ☐ Change ☐ Addition

TITLE DT ☐ DELETE

NAME ALEXANDER, MARK G
STREET ADDRESS 50 NORTH LAURA STREET, SUITE 3900
CITY-ST-ZIP JACKSONVILLE FL 32202

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

CR2E034 (10/97)