


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000015531 (1)**

1. Corporation Name

LONG WATER GALLERY, INC.

Principal Place of Business

**12 HARVARD DR
LAKE WORTH FL 33460**

Mailing Address

**12 HARVARD DR
LAKE WORTH FL 33460**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1997

4. FEI Number

65-0744647

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

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

2. Principal Place of Business

21 South G Street
Suite, Apt. #, etc.

2a. Mailing Address

P.O. Box 254
Suite, Apt. #, etc.

22. City & State

LAKE WORTH, FL

27. City & State

LAKE WORTH, FL

24. Zip

33460

25. Country

USA

29. Zip

33460

30. Country

USA

9. Name and Address of Current Registered Agent

**STAMBAUGH, REGINALD G
1400 CENTRE PARK BLVD
SUITE 860
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81. Name

KAREN L. MCKINLEY

82. Street Address (P.O. Box Number is Not Acceptable)

#12 HARVARD DRIVE

83.

84. City

LAKE WORTH

FL

85. Zip Code

33460

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 **Karen L. McKinley**

Signature, typed or printed name of registered agent and not applicable

President/Secretary

(NOTE: Registered Agent signature required when reinstating)

2-27-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**D
NAME
MCKINLEY, KAREN
STREET ADDRESS
12 HARVARD DR
CITY-ST-ZIP
LAKE WORTH FL 33460**

TITLE ☐ DELETE

**D
NAME
HIBBARD, RUSSELL
STREET ADDRESS
12 HARVARD DR
CITY-ST-ZIP
LAKE WORTH FL 33460**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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.

SIGNATURE:

Karen L. McKinley

2-27-98

540-14440

540-588-78

CR2E034 (10/97)