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FILED  
Jun 04 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 # P97000040493 (3)

1. Corporation Name

SUNDOWNER BOAT COMPANY, INC.



Principal Place of Business

727 SOUTH KROME AVENUE  
HOMESTEAD FL 33030

Mailing Address

727 SOUTH KROME AVENUE  
HOMESTEAD FL 33030

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/07/1997

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	City & State	30	Country

4. FEI Number

65-0759891

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CROWLEY, WILLIAM P JR  
727 SOUTH KROME AVENUE  
HOMESTEAD FL 33030

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	1.1 TITLE	
NAME	CROWLEY, WILLIAM P JR	1.2 NAME	
STREET ADDRESS	727 SOUTH KROME AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	HOMESTEAD FL 33030	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	
NAME	CROWLEY, ROBIN S	2.2 NAME	
STREET ADDRESS	727 SOUTH KROME AVENUE	2.3 STREET ADDRESS	
CITY - ST - ZIP	HOMESTEAD FL 33030	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	
NAME	BIBLE, C.L.	3.2 NAME	
STREET ADDRESS	727 SOUTH KROME AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	HOMESTEAD FL 33030	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	
NAME	GILL, RONALD	4.2 NAME	
STREET ADDRESS	727 SOUTH KROME AVENUE	4.3 STREET ADDRESS	
CITY - ST - ZIP	HOMESTEAD FL 33030	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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)