

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000044733 (8)  
1. Corporation Name

UNCLE AL'S BOATS, INC.

FILED  
Aug 12 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
9350 LAKE MARION CREEK ROAD  
HAINES CITY FL 33844  
113 BREAN ST.  
HAINES CITY, FL 33844

Mailing Address  
9350 LAKE MARION CREEK ROAD  
HAINES CITY FL 33844  
113 BREAN ST  
HAINES CITY, FL 33844

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified  
05/16/1997

4. FEI Number  
309463459

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  
BROSMAN, ALFRED G JR.  
9350 LAKE MARION CREEK ROAD  
HAINES CITY FL 33844  
113 BREAN ST.  
HAINES CITY, FL 33844

10. Name and Address of New Registered Agent  
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 ALFRED G. BROSMAN JR.  
Signature, typed or printed name of registered agent and title if applicable

Alfred G. Brosmann Jr.  
(NOTE: Registered Agent signature required when reinstating) DATE 7-7-98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	BROSMAN, KATHERINE A	9350 LAKE MARION CREEK ROAD	HAINES CITY FL 33844	<input type="checkbox"/>
D	BROSMAN, ALFRED G JR.	9350 LAKE MARION CREEK ROAD	HAINES CITY FL 33844	<input type="checkbox"/>
D	GIBSON, MARY	9350 LAKE MARION CREEK ROAD	HAINES CITY FL 33844	<input type="checkbox"/>
D	SCHAKELTON, PAUL	9350 LAKE MARION CREEK ROAD	HAINES CITY FL 33844	<input type="checkbox"/>
D	CHASE, DWANE	9350 LAKE MARION CREEK ROAD	HAINES CITY FL 33844	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
1.1	1.2	1.3	1.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1	2.2	2.3	2.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1	3.2	3.3	3.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1	4.2	4.3	4.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1	5.2	5.3	5.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1	6.2	6.3	6.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 ALFRED G. BROSMAN JR. PRES. 941-439-

CR2E034 (5/98)



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 21, 1998

UNCLE AL'S BOATS, INC.  
113 BREAM STREET  
HAINES CITY, FL 33844

SUBJECT: UNCLE AL'S BOATS, INC.  
Ref. Number: P97000044733

~~Please be advised, we have received your document for the above corporation; however, the document **has not been filed** and is being returned for the following:~~

~~The fee to file the annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.~~

~~After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.~~

~~If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.~~

~~ANNUAL REPORTS SECTION~~

~~Letter number: 598A00038444~~

*NOTE: Please note we moved 2 mos. after incorporation & this is 1st notice of annual report I got. I changed address on report & mailed same after talking w/ Shawn in your Dept.*

Respectfully  
Al Broomer for  
Pres.

*689  
282-9  
605-9  
Shawn*