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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000048983

1. Corporation Name

R & R WATERSPORTS INC.

riled
Mar 10, 1999 8:00 am
Secretary of State
03 10 1000 00147 003 ***150 00



Principal Place	of Business	Mailing Address				-) BIES! IEIG IS!	BL 10188 1151 5881
HOLIDAY INN MARINA 13201 O/S HWY. PO BOX 2697								
MARATHON FL 33050 MARATHON SHORES FL					· •	DO NOT WRITE IN THIS SPACE		
						Date Incorporated or Qualifed 06/02/1997		
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	1 1	Applied For
21	ace of Business	26				65-0758301		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22 27						5. Certifcate of Status Desired	Fee F	Required
City & State City & State						6. Election Campaign Financing	\$5.0	May Be
23 28						Trust Fund Contribution	Adder	d to Fees
Zip	Country	Zip	_	ıntry		8. This corporation owes the current year i		
24	25	29	30			Personal Property Tax.	∐Yes	□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name								
TAUT	TE, MICHAEL C			"	Name			
13201 O/S HWY.				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
MARATHON FL 33050				83	 -			
				33				
ı				84	City	F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Stati	utes, the a	bove	e-named corpo	pration submits this statement for the purpose of	of changing i	ts registered
office or re	egistered agent, or both, in the Sta	ite of Florida. Such change was	authorize	d by	the corporatio	n's board of directors. I hereby accept the app	ointment 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 A		
TITLE	P	☐ DELETE	1.1 T	ITLE			☐ Change	e
NAME	TAUTE, MICHAEL C		1.2 N	AME				
STREET ADDRESS	*** - ****		1.3 S	TREET	ADDRESS			
CITY-ST-ZIP	MARATHON FL 33050			ITY-ST	T-ZIP			a Daddition
TITLE			2.1 T	ME			Change	e Addition
NAME	TAUTE, MARTA A		2.2 N					1
STREET ADDRESS	510 84TH ST				ADDRESS			ļ
CITY-ST-ZIP	MARATHON FL 33050	□ priete		CITY-S	T-ZIP		☐ Change	a Addition
TITLE		☐ DELETÉ	3.1 T					S
NAME			3.2 N					}
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	3.4. C	ITY-S	1-ZIP		☐ Change	e Addition
NAME				VAME -				
STREET ADDRESS					ADORESS			
CITY-ST-ZIP				ITY-SI				
TITLE		☐ DELETE	5.1 T				☐ Change	e Addition
NAME			5.2 N					
STREET ADDRESS			538	TREET	ADDRESS			e 4,0,1 24
CITY-ST-ZIP			5.4 C	ITY-S1	T-ZIP	·		
TITLE		☐ DELETE	6.1 T	ITLE			Change	e Addition
NAME			6.2 N	AME				{
STREET ADDRESS			6.3 S	TREET	ADDRESS			1
' i								

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, with all other like empowered.

SIGNATURE: