## 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 # **P97000054586**

1. Corporation Name

LONGBOAT INVESTMENT SERVICES, INC.

Principal Place of Business										
6844	GULF	OF	ME	XICO	DR.					
OM	DOAT	VC.	V EI							

## FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90121 024 \*\*\*150.00



Principal Place	e of Business	Mailing Address							
6844 GULF OF MEXICO DR. LONGBOAT KEY FL		6844 GULF OF MEXICO DR. LONGBOAT KEY FL		DO NOT WRITE IN THIS	SPACE				
						3. Date Incorporated or Qualifed			
						06/20/1997			
2 Dringing! D	and of Business	2a. Mailing Address				4. FEI Number		Applied For	
2. Principal Place of Business		<del> </del>		65-0769265	<del> </del>	Not Applicable			
21   Suito Ant	# oto	Suite, Apt. #, etc.						Additional	
Suite, Apt. #, etc.		27	<b>—</b>			5. Certificate of Status Desired		Required	
22   City & State		City & State				6. Election Campaign Financing	\$5.0	0 May Be	
_	<del>-</del>	— ·				Trust Fund Contribution		d to Fees	
23   Zip	Country	Country Zip		Country		This corporation owes the current year Inta			
<b>─</b> 1 '		29	— ·			Personal Property Tax.			
24	25   9. Name and Address of Curren	<del></del>	[30]	Т		10. Name and Address of New Registered A			
	9. Name and Address of Curren	it Kedistalen Adelit		81	Name	10. Haine and Madiess of New Hogisters	-5		
BUC	KLE, RICHARD L			Ľl.		· · · · · · · · · · · · · · · · · · ·			
	OLD MAIN ST.		82 Street Ad		Street Add	ddress (P.O. Box Number is Not Acceptable)			
	DENTON FL 34205			83					
U IA	DENTON 1 E G4EGG			03					
				84	City		85 Zig	Code	
				f I	•	<u> </u>	<u></u>		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	tutes, the a	bove-	named corp	poration submits this statement for the purpose of con's board of directors. I hereby accept the appoin	:hanging i tment as	ts registered	
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	tions of, Section 607.0505, I	Florida Stat	utes.	ne corporati	on's board of directors. Thereby accept the appoint	inon do	. og.oto. od	
	, ,					• .			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NO	OTE: Registered	d Agent	signature require	od when reinstating) DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	☐ DELETE	1.1 Π	ITLE			☐ Change	e 🔲 Addition	
NAME	BROWNLEE, JOHN J		1.2 N	AME					
STREET ADDRESS	3117 TAUNTON DR. WEST		1.3 \$	TREET A	ADDRESS				
CITY-ST-ZIP	BRADENTON FL 34205		1.4 C	ITY-ST-	ZIP	•			
TITLE	D	☐ DELETE	2.1 TI				☐ Change	Addition	
NAME	BELL, LINDA K		2.2 N	AME	}			}	
	3117 TAUNTON DR. WEST				ADDRESS				
STREET ADDRESS	BRADENTON FL 34205	•	B			and the second second second		-	
CITY-ST-ZIP	BRADENTON FE 34203	☐ DELETE	3.1 Ti	TTY-ST	-212		Change	e	
TITLE									
NAME			3.2 N					ļ	
STREET ADDRESS			3.3 S	TREET	ADDRESS			1	
CITY-ST-ZIP				ITY-ST	-ZIP			- D Addition	
TITLE		☐ DELETE	4.1 Ti	ITLE		·	Chang	e	
NAME	. 1		4.2 N	AME	1				
STREET ADDRESS	:		4.3 S	TREET	ADDRESS				
CITY-ST-ZIP			4.4 C	TY-ST-	ZIP				
πιε		☐ DELETE	5.1 Π	ITLE			Change	e ☐ Addition	
NAME			5.2 N	AME				]	
STREET ADDRESS			5.3 S	TREET	ADDRESS			j	
CITY-ST-ZIP			5.4 C	ITY-ST-	ZIP			ì	
TITLE		☐ DELETE	6.1 ™	ITLE	- $+$		☐ Chang	e 🔲 Addition	
			6.2 N	AME					
NAME					ADDRESS				
STREET ADDRESS	<u>:</u>			ITY-ST-		•		ļ	
CITY-ST-ZIP			0.4 U	11-01-	- LIT				

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.