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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P97000097495 (0)

VINTAGE BOATS & CARS INC.

300 WINDWA		300 WINDWARD ISLAND CLEARWATER FL 33767				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mailing Address				11/14/1997 4. FEI Number Applied For
21.		26				59-3477605 Not Applicable
Sulte, Apt	. #, etc.	Suite, Apt. #, etc.	<u> </u>			\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	le	City & State				6. Election Campaign Financing \$5.00 May Be
23		28	· · ·			Trust Fund Contribution Added to Fees
Zip 24	Country	Zip	$\vdash$	country	/	This corporation owes or has paid the current year Intangible
24	25 Name and Address of Current	29   Registered Agent	30			Personal Property Tax due June 30. Yes No
MC	OORE, GORDON			81	Name	· · · · · · · · · · · · · · · · · · ·
300 WINDWARD ISLAND CLEARWATER FL 33767				82	Ctroot	at Address (P.O. Box Number is Not Acceptable)
				02	Street	a Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	<b>85</b> Zip Code
						FL   i
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						
C/G/I/ I/ O/I/C	Signature, typed or printed name of registered agent		NO1F Registe	ered Age	nt signatur	ле required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	TURITH R. MAGRE	☐ DELETE		TITLE		L. Change L. Addition
STREET ADORESS	JUDITH B. MOORE ESLAND JOD NINGWARD ESLAND CLOARWATCH, 76 33767			1.2 NAME 1.3 STREET ADDRESS		
City-St-Zip	CLARWATER, 96 33767			1.4 CITY - ST - ZIP		
TITLE		DELETE		TITLE	1.511	Change Addition
NAME			2.2	NAME		
STREET ADDRESS			2.3	STREET	ADDRESS	
CITY-ST-ZIP			2.4	4 CITY - S	ST-ZIP	
THLE DELETÉ			3.1	3.1 TITLE		Change Addition
NAME			3.2	3.2 NAME		
STREET ADDRESS		3.3	3.3 STREET ADDRESS			
CITY-ST-ZIP		I I buese		. CITY-S	ST-ZIP	
TITLE		☐ DELETE	4.1	TITLE		Change Addilion

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 13 if changed, or on an attachment with an address.

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

4.4 CITY - ST- ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

Change

Change

Addition

Addition

**FILED** 

Feb 18 1998 8:00am

Secretary of State