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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Mar 31 1998 8:00 am Secretary of State

DOCUMENT # 1. Corporation Name	P97000097812 (6)	
LOGGERHEAD CHA	ARTERS INC.	
Principal Place of Business	Mailing Address	

LOGG	ERHEAD CHARTERS INC.						<b>.</b> <b> </b>	
Principal Pla	ace of Business	Mailing Address					OTAL DOME THE POST IS	
728 CASA I	OMA RIVD	728 CASA LOMA BLVI	)					
728 CASA LOMA BLVD BOYNTON BEACH FL 33435 728 CASA LOMA BLVD BOYNTON BEACH FL 33			135		DO HOT HIGH	Tr. #1 Tr. 10 00 10 1		
İ					3 D	ate Incorporated or Qualified	TE IN THIS SPACE	
					I .	1/17/1997	•	
2. Principal Place of Business 2a, Mailing Address		2a, Mailing Address	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			El Number	<b>&gt;</b>	Applied For
21		26	477					Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>5</b> . C	ertificate of Status Desired		75 Additional e Reguired	
City & State		City & State			6. EI	ection Campaign Financing		.00 May Be
23		28				ust Fund Contribution	Add	ded to Fees
Zip	Country	Zip	<b>⊢</b>	untry		nis corporation owes or has p		
24	25 9. Name and Address of Currer	29 nt Registered Agent	30	1	<del></del>	ersonal Property Tax due Jur ame and Address of New F		<b>≥</b> No
N	ESBIT, DONALD			81 Nar			TOBICION ABOUT	
	28 CASA LOMA BLVD			82 Stre	Address (D.O.	Dou Mumboo in Not Annua	a h la V	
	OYNTON BEACH FL 33435			52 506	at Address (P.O	. Box Number is Not Accept	able)	
				83				
				84 City			85	Zip Code
				'	·		PL:	.
11. Pursuan office or	it to the provisions of Sections 607,050 registered agent, or both, in the State am familiar with, and account the oblig	02 and 607.1508, Florida \$1a1 e of Florida. Such change wa	lutes, the a s authorize	bove-nam d by the c	ed corporation s proporation's boa	submits this statement for the ard of directors. I hereby acc	<ul> <li>purpose of changing</li> <li>ept the appointment</li> </ul>	ng its registered it as registered
agent. I	am familiar with, and accept the oblig	ations of, Section 607.0505,	Florida Sta	tutes.		<u> </u>	10-017	
SIGNATURE	Signature, typed or printed name of registered agr	Out and the distribution of the	OTE: Registere	d Agent signs	re required when rein	oslatino)	DATE	<del>-</del>
12.	<del></del>	D DIRECTORS	13.			DITIONS/CHANGES TO OFF		TORS IN 12
TITLE	D	☐ DELETE	1.1 T	TLE	0		Chan	
NAME	NESBIT, DONALD		1.2 N	AME	NESBIT	T Donald		
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1,,,,,		DELETE		TY-ST-ZIP	<del> </del> -		<u></u>	ł
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CITY-ST-ZIP				Y-ST- <i>Z</i> IP				
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NAME STREET ADDRESS		DELETE					L Change	e Addition
STREET ADDRESS   CITY-ST-ZIP		☐ DELETE	5.2 NAM	AE			Onang	2/
		☐ DELETE	•	AE Eet address			3	5
TITLE			5.3 STR				7	3.31
NAME		☐ DELETE	5.3 STR	EET ADDRESS - St - ZIP	1	0000247	7	3.31
i			5.3 STR 5.4 CITY 6.3 TITL 6.2 NAM	EET ADDRESS '-st-zip E	1	<b>000024</b> ア -03/31/98nin2	7	3.31
NAME			5.3 STR 5.4 CITY 6.3 TITL 6.2 NAM	EET ADDRESS '-ST-ZIP E E EET ADORESS	1	0000247 -03/31/980102 ***150.00	7	3.31

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 Block 12 or Block 13 if chapped or on an attachment with an address.