

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

FILED

Aug 25 1998 8:00am
Secretary of State

| | | |
|--|---|--|
| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # P97000103101 (6)

1. Corporation Name

NAUTICA FINANCIAL CORPORATION, INC.

Principal Place of Business

277 SUSSEX CIRCLE
JUPITER FL 33458

Mailing Address

277 SUSSEX CIRCLE
JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/05/1997

4. FEI Number

65-0798736

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21 50 US Hwy #1

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 212

27 "

City & State

City & State

23 JUPITER, FL

28 "

Zip

Zip

24 33477 Country USA

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEAUPRE, MICHAEL W
277 SUSSEX CIRCLE
JUPITER FL 33458

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

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 AND DIRECTORS IN 12

TITLE DSTP ☐ DELETE
NAME BEAUPRE, MICHAEL W
STREET ADDRESS 277 SUSSEX CIRCLE
CITY-ST-ZIP JUPITER FL 33458

1.1 TITLE President ☐ Change ☒ Addition
1.2 NAME Michael W. Morse, Jr.
1.3 STREET ADDRESS 50 US Hwy #1 Suite 212
1.4 CITY-ST-ZIP Jupiter, FL 33477

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Treasurer ☐ Change ☒ Addition
2.2 NAME TERRY WILKINSON
2.3 STREET ADDRESS 50 US Hwy #1 Suite 212
2.4 CITY-ST-ZIP Jupiter, FL 33477

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Secretary ☒ Change ☐ Addition
3.2 NAME Michael Beaupre
3.3 STREET ADDRESS 50 US Hwy #1 Suite 212
3.4 CITY-ST-ZIP Jupiter, FL 33477

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

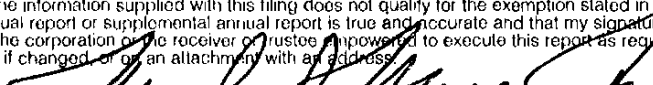
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 100002624811
5.3 STREET ADDRESS -08/26/98--01004--001
5.4 CITY-ST-ZIP ***550.00

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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



8/25/98 (561) 744-5577

CR2E034 (10/97)