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

PROFIT CORPORATION ANNUAL REPORT

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(4)

HARBORMASTER SERVICES CORPORATION OF LONGBOAT KE Y, INC.						
Principal Place of Business Mailing Address						E TOO HAND IS THE TIRES TRIVE TO LOG WITH A STOCK OF BY A COLL ALONG A COLL ALONG A COLL ACCULATION AND A COLL
2800 HARBOURSIDE DRIVE 2600 DOUGLAD RD						
LONGBOAT KEY FL 34228		803				DO NOT WRITE IN THIS SPACE
		CORAL GABLES FL 331	34			3. Date Incorporated or Qualified
		U\$				01/10/1991
Principal P	lace of Business	2a. Mailing Address	. Mailing Address			4. FEI Number Applied For
21		[26]			59-3058148 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip 24	Country 25	Z(ρ)	Countr 30	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre					10. Name and Address of New Registered Agent
AR	SENAULT, KENNETH G JR		8	1	Name	
	25 ULMERTON ROAD		8:	2	Street Addre	ess (P.O. Box Number is Not Acceptable)
LARGO FL 34641			8:	3	······································	
	100 12 01011		8-	4	City	85 Zip Code
					4	FL of the second description of the second d
SIGNATURE						poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
	Signature: typod or princed rame of repistors diagram and life of applicable. 12. OF FICERS AND DIRECTORS		(NOT) Registered Agent signature requi		ii sigriature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	VERNON, WILLIAM G	<u> </u>		1.2 NAME		
STREET ADDRESS	7241 S W 168TH ST #C		1.3 STRE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		7-7IP	
TITLE		DELETE		2.1 TITLE		Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	_		2. 4 CITY		T-ZIP	
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	E		
STREET ADDRESS			3.3 STRE	E3 /	ADDRESS	
CITY-ST-ZIP			3.4 CHY-		T- ZIP	
TITLE				4.1 TITLE		Change Addition
NAME			4. 2 NAM			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				4.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE			L Change L Addition
NAME			5.2 NAME			
STREET ADDRESS		1	5.3 STREET ADDRESS			
CITY OF 74D			5.4 0(1)	- ST	i - 7(P	

6 4 CITY-ST-ZIP 14. Thereby 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 supplied enter a notificer or director of the corporation or the receiver or trusted 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

4/9/69

Change

☐ Addition

FILED

Apr 16 1998 8:00am

Secretary of State