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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # \$29871

YACHTING PERSONIFIED. INC.

FILED

Apr 30 1997 8:00am

Secretary of State

Principal Place of Business 15466 ADMIRALTY CIRCLE SUITE 6 FORT MYERS FL 33917				Mailing Address 15466 ADMIRALTY CIRCLE SUITE 6 FORT MYERS FL 33917-3285							
								3. Date Incorporated or Qualified 02/05/1991	d 3a. Date of Last Report 04/29/1996		
2. Principal Place of Business				2a. Mailing Address 26				4. FEI Number 65-0250101	Applied For Not Applicable		
Suite, Apt #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	Fee Required		
City & State				City & State 28 Zip Country				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24				Zip	30	untry	<i></i>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent			
MITS	IPSON, JAM		HIL DOUB	nered Agent		81	Name	10. Name and Address of New Ne	gistered A	gent	
15466 ADMIRALTY CR #6 SUITE 6							Street Add	ress (P.O. Box Number is Not Acceptable)			
FT MEYERS FL 33917						83					
l						84	City		FL	85 Zip (Code
11. Pursuant office or r agent. I a	to the provis registered ag im familiar wi	ions of Sections 607.05 gent, or both, in the Stat ith, and accept the obli	502 and 6 te of Flori gations o	607.1508, Florida Statu da. Such change was I, Section 607.0505, F	utes, the a authorize forida/Sta	ibov ed/b	e-named cor y the corpora s.	poration submits this statement for the partion's board of directors. I hereby acceptions	ot the appo	intment as	s registered registered
SIGNATURE	<u>Jame</u>		np5	ON DIR.	V24	d Art		ired when reinstating)	4/24/	197	
12.		OFFICERS AI			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	D			DELETE	1.1 T	IILE				Change	Addition
NAME		N, JAMES G.			1.2 N						
STREET ADDRESS	FT. MYER	MIRALTY CIR #6					ADDRESS				
CITY-ST-ZIP TITLE	ri, milli	O I L		☐ DELETE	1.4 C		ST - 7IP			Change	Addition
NAME					2.2 M		1			Onlings	riddition
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STREET ADDRESS							I ADDRESS				
City. St. 70					1		ST - 71P				

14. I do 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 change or on an attachment with an address.

4/14/97

911.547.3553