

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
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95 JUN 14 PM 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 833399

1. Corporation Name

BOATYARD PROPERTIES INC.

Principal Place of Business

Mailing Address

1554 STICKNEY PT RD
SARASOTA
FL 34231

000001515760

-06/16/95--01083--025

****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/19/91

3a. Date of Last Report

MAY 1994

4. FEI Number

65-0250731

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

Added in Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 AS ABOVE

25 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STANLEY GOLDSMITH
1605 MAIN ST
SUITE 814
SARASOTA FL 34231

81 Name

FREDRICK N. GRIFFITHS

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

1554, STICKNEY PT ROAD

83

SARASOTA

84 City

FL

85 Zip Code

34231

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

FREDRICK N. GRIFFITHS

Signature: Typed or printed name of registered agent and the corporation

Signature: Registered Agent signature (typed and when registering)

05/02/95

Date

12. OFFICERS AND DIRECTORS

TITLE	P.S.T.
NAME	F.N. GRIFFITHS
STREET ADDRESS	1554 STICKNEY PT RD.
CITY - ST - ZIP	SARASOTA FL 34231
TITLE	AST S.
NAME	J. PAISE
STREET ADDRESS	1554 STICKNEY PT RD.
CITY - ST - ZIP	SARASOTA FL 34231
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	P.S.T.	☒ Change ☐ Addition
2. NAME	F.N. GRIFFITHS	
3. STREET ADDRESS	1554 STICKNEY PT RD	
4. CITY - ST - ZIP	SARASOTA FL 34231	
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME	DELETE	
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	AST S.	☐ Change ☒ Addition
3.2 NAME	SANDRA MORGAN	
3.3 STREET ADDRESS	1554 STICKNEY PT RD.	
3.4 CITY - ST - ZIP	SARASOTA FL 34231	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

FREDRICK N. GRIFFITHS

Signature: Typed or printed name of signing officer or director

05/02/95

Date

Signature: Name