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

DOCUMENT # 1. Corporation Name S52517

(7)

CLEARWATER CUSTOM YACHTS, INC.

FILED
May 08 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address				I TO DESCRIPTO SEAT OLISTO ASSOCIATION FOR	i eini oini aini aini aini aini isti isti	
2240 BELLEAIR ROAD SUITE 150 CLEARWATER FL 34624		2240 BELLEAIR ROAD SUITE 150 CLEARWATER FL 3462			DO NOT WRITE	IN THIS SPACE
					3. Date Incorporated or Qualified 05/13/1991	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		 	59-3064929	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired *	\$8.75 Additional Fee Required
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	<i>y</i>	8. This corporation owes or has pai	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·
24	25	29	30		Personal Property Tax due June 30. Yes No	
	g, Name and Address of Curre	ent Registered Agent		T	10. Name and Address of New Re	gistered Agent
	O ub ie, Robert J.		81	Name		
	40 Be lleair RD. ITE 150		82	Street Add	ress (P.O. Box Number is Not Acceptab	pie)
CL	EARWATER FL 34624		83			
불합한 환	r.		84	City		FL 85 Zip Code
Office or r	to the provisions of Sections 607.05 egisterod agent, or both, in the Stalm familiar with, and accept the obli	te of Florida. Such change wa:	s authorized b	y the corporat	poration submits this statement for the pation's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE	in regiminal with, and accept the obji	gations or, Section 667.6565, I	i ionua statute	5.		
	Signature, type (for portloct name of registered a			ent signature requi	red when reinstaling)	DA16
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PD CONTRACTOR OF THE PROPERTY OF	L DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME DROUBIE, ROBERT J.			1.2 NAME			
STREET ADDRESS 2240 BELLEAIR RD., #150			1.3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL	DELETE	1.4 CITY - ST - ZIP DELETE 2.1 ITHE			Ohanna Addition
TITLE		□ Milit	2.1 TITLE			☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP TITLE			2. 4 CITY -	ST-ZIP		Change Addition
NAME		☐ DELETÉ	3.1 TITLE			Change Chadmon
STREET ADDRESS			3.2 NAME	1.4000000		
			3.3 STREET 3.4 CITY-			
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	51-ZIF		Change Addition
NAME			4. 2 NAME			E3 onenge E3 succision
STREET ADDRESS			4.3 STREE1	1		i
CITY-ST-ZIP			4.4 CITY-S	i i		
TITLE		☐ DELETE	5.1 TITLE	11-211		Change Addition
NAME			5.2 NAME			- see go see south
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - 9	+		
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			c.w.gv naddon
*T ADDRESS			63 STREET	ADDRESS		
- Applicas			BACITY O			

nertify 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 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 or 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