

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

FILED

Apr 16 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **S58845** (6)
1. Corporation Name
VITAMIN SEA CHARTERS, INC.

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|---|--|
| Principal Place of Business 13175 OVERSEAS HWY MARATHON FL 33050 US | Mailing Address 13175 OVERSEAS HWY MARATHON FL 33050-3546 US |
|---|--|



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|--|------------|---------------------|------------|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 06/07/1991 | 3a. Date of Last Report 05/01/1996 |
| 21 Suite, Apt. #, etc. | 26 | 27 City & State | | 4. FEI Number 65-0345283 | Applied For <input type="checkbox"/> Not Applicable |
| 22 City & State | 27 | 28 | | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 23 Zip | 25 Country | 29 Zip | 30 Country | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |

9. Name and Address of Current Registered Agent

**FERRELL, HEIDI
1740 OVERSEAS HWY
MARATHON FL 33050**

10. Name and Address of New Registered Agent

| | |
|---|---------------------------------|
| 81 Name | (Address change only) same name |
| 82 Street Address (P.O. Box Number is Not Acceptable) | 58008 Morton St |
| 83 | |
| 84 City | (Marathon) Grassy Key FL |
| 85 Zip Code | 33050 |

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------|---|----------------------|
| TITLE | DP | 1.1 TITLE | DP |
| NAME | FERRELL, BILL | 1.2 NAME | same person |
| STREET ADDRESS | 1740 OVERSEAS HWY | 1.3 STREET ADDRESS | 58008 Morton St. |
| CITY-ST-ZIP | MARATHON FL | 1.4 CITY-ST-ZIP | Grassy Key, FL 33050 |
| TITLE | DV | 2.1 TITLE | DV |
| NAME | FERRELL, HEIDI | 2.2 NAME | same person |
| STREET ADDRESS | 1740 OVERSEAS HWY | 2.3 STREET ADDRESS | 58008 Morton St. |
| CITY-ST-ZIP | MARATHON FL | 2.4 CITY-ST-ZIP | Grassy Key, FL 33050 |
| TITLE | ST | 3.1 TITLE | |
| NAME | FERRELL, HEIDI | 3.2 NAME | |
| STREET ADDRESS | 1740 OVERSEAS HWY | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | MARATHON FL | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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 changed, or on an attachment with an address.

SIGNATURE: Heidi Ferrell / Heidi Ferrell 4-11-97 305-743-2126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)