## 5-1-98 B 195 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 01 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S85439

(5)

BURGOYNE NAUTICAL CONCEPTS CO., INC.

Principal Place of Business Mailing Address			124	T TODISCUS ON STAND BY SHAND BY SHAND TORS OF DESIGNATION OF SHAND BY SHAND			'U DIBUT BIBIT BIRIT BERLE TRAL
22458 SOUTHWEST 56TH AVENUE		22458 SOUTHWEST 56TH AVENUE					
BOCA RATON FL 33433		BOCA RATON FL 33433		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified		
					10/07/1991		
2. Principal Place of Business 2a. Mailing A					4. FEI Number		Applied For
21		26		65-0289930		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>X</b>	\$8.75 Additional	
City & State		City & State		C Floation Compaign Financian	<u> </u>	Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country			,	8. This corporation owes or has p	aid the cu	
24	25	29	30		Personal Property Tax due Jun	e 30.	Yes No
	9. Name and Address of Curren	t Registered Agent	81		10. Name and Address of New R	egistered	Agent
Burgoyne, Robert S.				Name			
22458 SOUTHWEST 56TH AVENUE			B2	Street Add	ress (P.O. Box Number is Not Accepta	ble)	
ВО	CA RATON FL 33433		83	<del></del>			
			84	City		FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050.	2 and 607,1508. Florida Statu	les, the above	e-named corr	poration submits this statement for the	purpose o	of changing its registered
office or r	registered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such change was	authorized by	the corpora	tion's board of directors. I hereby acce	pt the ap	pointment as registered
SIGNATURE	in familia with the desept the owngr	10010 01, 000001 007.0000, 11	Orion Otaligio	,.			
SIGNATURE	Signature, typed or printed harve of requistered ago	nt and title 4 applicable (NO	It: Registered Agr	nt signature requi	red when reinstating)	DATE	
12.	OFFICERS AND	······	13.		ADDITIONS/CHANGES TO OFFI	CERS AN	
TITLE	PD BURGOVAIC DODERT C	☐ DELET <b>E</b>	1.1 TITLE				Change Addition
NAME			1.2 NAME				
STREET ADDRESS	MAGA DIFONER		1.3 STREET		•		
CITY-ST-ZIP TITLE	VD VD	DELETE	1.4 CITY - S 2.1 TITLE	1-212			Change Addition
NAME	BURGOYNE, ELIZABETH		2.2 NAME	1			
STREET ADDRESS	22458 S.W. 56TH AVENUE		23 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				☐ Change ☐ Addition
NAME	·		3.2 NAME				
STREET ADDRESS	3.3		3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST - ZIP			
TITLE	-	DELETE	4.1 TITLE				Change Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP				T-ZIP			
TITLE			5.1 TITLE	j			Change Addition
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET				=
CITY-ST-ZIP			5.4 CiTY - S	T-ZIP			Change Addition
TITLE		☐ ocreit	6.1 TITLE	- 1			CH CHANGE CH AUGHION
NAME CTOCCT ADODESCS			6.2 NAME	ADDOLOG			
STREET ADDRESS	3.		6.3 STREET	1			

14. I 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.