

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S91700 (2)
1. Corporation Name
BOAT LIFT SOURCE, INC.



Principal Place of Business 1 INDUSTRIAL PARK LANE UNIT C DESTIN FL 32541	Mailing Address 1 INDUSTRIAL PARK LANE UNIT C DESTIN FL 32541
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4812 Gulf Breeze Pkwy Suite, Apt. #, etc.		2a. Mailing Address 26 4812 Gulf Breeze Pkwy Suite, Apt. #, etc.		3. Date Incorporated or Qualified 11/04/1991	
22 City & State 23 Gulf Breeze		27 City & State		4. FEI Number 59-3103982 Applied For Not Applicable	
24 Zip 32541		29 Country USA		5. Certificate of Status Desired 8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution 5.00 May Be Added to Fees	
28		31		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent PERKINS, THEODORE M., JR. 1 INDUSTRIAL PARK LANE, UNIT C DESTIN FL 32541		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	NAME	11 TITLE	12 NAME
STREET ADDRESS	PERKINS, DEBRA A.	13 STREET ADDRESS	662 Bayshore Dr
CITY-ST-ZIP	082 BAYSHORE DR DESTIN FL	14 CITY-ST-ZIP	Destin, FL 32541
TITLE	NAME	21 TITLE	22 NAME
STREET ADDRESS	PERKINS, JR. T	23 STREET ADDRESS	662 Bayshore Dr
CITY-ST-ZIP	#1 INDUSTRIAL PARK LANE DESTIN FL	24 CITY-ST-ZIP	Destin, FL 32541
TITLE	NAME	31 TITLE	32 NAME
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	NAME	41 TITLE	42 NAME
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	NAME	51 TITLE	52 NAME
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	NAME	61 TITLE	62 NAME
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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.

SIGNATURE _____ 4/24/98 922 4445

CP2E034 (10/97)