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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

V28303

(8)

CRYSTAL LAKE BOATS & R.V. STORAGE, INC.

Dipolinal Place of Business Mailing Address



Principal Place of Business Mailing Address								
1951 NW 44 P	ST EACH FL 33064		1951 NW 44 ST POMPANO BEACH FL 33064					
						3. Date incorporated or Qualified 04/14/1992	3e. Date of Last 01/18/	
Principal Place	e of Business	2a. Mailing Ad	Idress			4. FEI Number		Applied For
		26				65-0320073		Not Applicab
Suite. Apt. #,	e!c.	Suite, Apt.	. #, etc.			5. Certificate of Status Desired		5 Additional e Required
City & State		Oity & Stal	te			Election Campaign Financing Trust Fund Contribution	LI Ade	00 May Be led to Fees
Zφ	Country	Zip		Country 30	/	8. This corporation has liability for Florida Statutes Yes	intangible tax under	s 199.032,
	9. Name and Address of Curre	rt Registered Age	nl	[30]		10. Name and Address of New F		
	g. Name and Address of Curre	Tregistored rigor	····	81	Name			
LACENT	'RA, CHARLES A.			82	Street Addr	ress (P.O. Box Number is Not Acceptat	bie)	
1951 NW 44 ST POMPANO BEACH FL 33064				83				
				B ²			 85	Zip Code
				1	1	ration submits this statement for the pu	FL "	
	Uprating typed or pricted can electrogistered age	Land little d'application	(NO	TE Registered Ag	ent signature require	ud when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIREC	TORS IN 12
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.	LACENTRA, CHARLES A.			1.2 NAME				
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and opes not quarry for the earling that the information indicated on this ar nual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this ar nual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this ar nual report 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:

HATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/96(954)973-433/