

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **J50915 (4)**  
1. Corporation Name  
**KAY BOATS INC.**



Principal Place of Business Mailing Address  
**% RICHARD W. KAY**  
**6819 WINONA ST**  
**PANAMA CITY FL 32404**

3. Date Incorporated or Qualified **01/02/1987** 3a. Date of Last Report **05/01/1995**  
4. FEI Number **59-2754130** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 **% James W. Lingo** 26 **% James W. Lingo**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 **Hwy 81 So.** 27 **P.O. Box 128,**  
City & State City & State  
23 **Ponce De Leon, Fl.** 28 **Ponce De Leon, Fl**  
Zip Country Zip Country  
24 **32455** 25 **U.S.** 29 **32455** 30 **U.S.**

9. Name and Address of Current Registered Agent  
**KAY, RICHARD W.**  
**6819 WINONA ST**  
**PANAMA CITY FL 32404**

10. Name and Address of New Registered Agent  
81 Name **Lingo James W**  
82 Street Address (P.O. Box Number is Not Acceptable) **Hwy 81 So.**  
83  
84 City **Ponce De Leon,** FL 85 Zip Code **32455**

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 **James W. Lingo** *James W Lingo* DATE **5-21-96**

12. OFFICERS AND DIRECTORS

TITLE	DPS	<input checked="" type="checkbox"/> DELETE
NAME	KAY, RICHARD W.	
STREET ADDRESS	6819 WINONA ST	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	DVT	<input checked="" type="checkbox"/> DELETE
NAME	KAY, LEONA R.	
STREET ADDRESS	6819 WINONA ST	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	<b>Lingo James W</b>	
13 STREET ADDRESS	<b>Hwy 81 So. - P.O. Box 128 'NA'</b>	
14 CITY-ST-ZIP	<b>Ponce De Leon, Fl. 32455</b>	
21 TITLE	<b>V-S-T</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	<b>Lingo Helen Stewart</b>	
23 STREET ADDRESS	<b>Hwy 81 So. P.O. Box 128 'NA'</b>	
24 CITY-ST-ZIP	<b>Ponce De Leon, Fl. 32455</b>	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 address.

SIGNATURE: *James W Lingo* DATE: **5-21-96** TELEPHONE: **904-836-4799**

CR2E034 (12/95)