2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004
Secretary of State

DOCUMENT# F94279

Entity Name: LIGHTHOUSE POINT YACHT SERVICE AND SUPPLIES INC.

Current Principal Place of Business:

3050 SHERWOOD BLVD
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

3050 SHERWOOD BLVD
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 59-2233457 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAINER, CARYN S.
600 SW 4TH AVE
FT. LAUDERDALE, FL 33315

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SWARD, DAVID GORDON,
Address: 2640 NE 23 CT.
City-St-Zip: LIGHTHOUSE PT, FL 00000,

Title: STD ( ) Delete
Name: SWARD, ROBIN LYNN,
Address: 2640 NE 23 CT.
City-St-Zip: LIGHTHOUSE PT, FL 00000,

Title: V ( ) Delete
Name: SWARD, MICHAEL D
Address: 3050 SHERWOOD BLVD
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SWARD, DAVID GORDON,
Address: 3050 SHERWOOD BLVD
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: STD (X) Change ( ) Addition
Name: SWARD, ROBIN LYNN,
Address: 3050 SHERWOOD BLVD
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID G SWARD PD 04/12/2004

Electronic Signature of Signing Officer or Director — Date