

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000041285

1. Entity Name
ALIBI YACHTS OF FLORIDA, INC.



Principal Place of Business
1004 GUAVA ISLE
FORT LAUDERDALE, FL 33315

Mailing Address
1004 GUAVA ISLE
FORT LAUDERDALE, FL 33315



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1002871

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORRELL, THOMAS H
1004 GUAVA ISLE
FORT LAUDERDALE, FL 33315

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

03 JAN 08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EIDE, ROGER D
STREET ADDRESS	1004 GUAVA ISLE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	V
NAME	CORRELL, TOM
STREET ADDRESS	1004 GUAVA ISLE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	STD
NAME	EIDE, VICKI S
STREET ADDRESS	1004 GUAVA ISLE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33315
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/08/08-80013-014 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas H. Correll VP