

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90069 038 ***150.00



DOCUMENT # P94000040114

1. Entity Name
COLUMBO YACHTS, INC.

Principal Place of Business
**6101 NW 10TH TERRACE.
 FORT LAUDERDALE FL 33309
 US**

Mailing Address
**6101 NW 10TH TERRACE.
 FORT LAUDERDALE FL 33309
 US**



1st MOORE CR2E034 (10/05)

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3244884		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75-Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
PATTERSON, RICHARD B 6101 NW 10TH TERR FORT LAUDERDALE FL 33309				Name <i>William O. Hood</i>			
				Street Address (P.O. Box Number is Not Acceptable) <i>501 CORNWALL RD</i>			
				City <i>SANFORD</i>		FL	

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 *William Hood* *William Hood* DATE *2-7-07*

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	CPD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HUTCHINGS, JAMES L			NAME			
STREET ADDRESS	6101 NW 107TH TERR			STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33309			CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HUTCHINGS, BARBARA J			NAME			
STREET ADDRESS	6101 NW 107TH TERR			STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33309			CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HUTCHINGS, RONALD J.			NAME			
STREET ADDRESS	6101 NW 107TH TERR			STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33309			CITY-ST-ZIP			
TITLE	V	<input checked="" type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
NAME	PATTERSON, RICHARD B.			NAME	<i>William Hood</i>		
STREET ADDRESS	6101 NW 107TH TERR			STREET ADDRESS	<i>501 CORNWALL RD</i>		
CITY-ST-ZIP	FORT LAUDERDALE FL 33309			CITY-ST-ZIP	<i>SANFORD, FL 32773</i>		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Hood* *William Hood* DATE *2-7-07* 407-330-3323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR