

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 194525 1. Entity Name YACHT HAVEN INC	
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Principal Place of Business YACHT HAVEN INC 2425 LAKE DRIVE RIVIERA BEACH, FL 33404 US	Mailing Address 506 DATURA STREET STE B WEST PALM BEACH, FL 33401 US
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01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6069439	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BERGIN, ROBERT T JR 506 DATURA STREET SUITE B WEST PALM BEACH, FL 33401

**DO NOT WRITE
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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

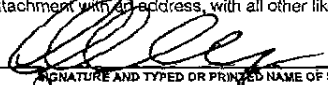
9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAM, JOYCE 17601 103TH TERRACE JUPITER, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIGLIOTTI, TONY 125 INLET WAT WEST PALM SHORES, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCARPA, JOSEPH 2425 LAKE DR RIVIERA BCH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFITH, MARK 840 ANCHORAGE DRIVE NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BERGIN, ROBERT T 506 DATURA STREET, STE B WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/13/06-80025-009 150.00

**DO NOT WRITE
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-2006 561-659-6540
Date Daytime Phone #

Robert T. Bargin, STD