

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 229134

1. Entity Name
CASTLE HARBOR BOATS INC



Principal Place of Business
**9610 OLD CUTLER RD.
CORAL GABLES, FL 33156**

Mailing Address
**5825 SUNSET DRIVE
SUITE 207
SOUTH MIAMI, FL 33143 US**



08072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1144628

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SVENDSEN, R. CAI
5825 SUNSET DRIVE
SUITE 207
SOUTH MIAMI, FL 33143**

**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 is sufficient, if applicable)

(NOTE: Registered Agent signature required when rechartering)

DATE

000000574578
08/17/2006 09:03:22 150.00
AUG 15, 2006

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	STORER, GEORGE B III
STREET ADDRESS	11 GROVE AVE
CITY-ST-ZIP	BRANFORD, CT
TITLE	PD
NAME	SVENDSEN, R. CAI
STREET ADDRESS	5825 SUNSET DRIVE, SUITE 207
CITY-ST-ZIP	SOUTH MIAMI, FL 33143
TITLE	ST
NAME	SVENDSEN, GAIL
STREET ADDRESS	5825 SUNSET DRIVE, SUITE 207
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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

AUG 15, 2006

DATE

DATE OF PRINTING