

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 8:00 am
Secretary of State

07-10-2006 90025 019 ***150.00

DOCUMENT # 263744

1. Entity Name
SNAPPER CREEK MARINA, INC



Principal Place of Business
**11190 SNAPPER CREEK RD
CORAL GABLES, FL 33156-4216 US**

Mailing Address
**11190 SNAPPER CREEK RD
CORAL GABLES, FL 33156-4216 US**

50021932



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07012006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

59-1030262

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME MASE, CURTIS J
STREET ADDRESS 5505 ARBOR LANE
CITY-ST-ZIP MIAMI, FL 33156

TITLE ☐ Change ☒ Addition
NAME **D JUNGARDELLA, JOSE**
STREET ADDRESS **5295 FAIRCHILD WAY**
CITY-ST-ZIP **CORAL GABLES, FL. 33156**

TITLE D ☐ Delete
NAME OLEN, RANDY J.
STREET ADDRESS 10725 LAKESIDE DRIVE
CITY-ST-ZIP CORAL GABLES, FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HASSAN, JOE
STREET ADDRESS 10950 OLD CUTLER ROAD
CITY-ST-ZIP CORAL GABLES, FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Delete
NAME TILLET, BILL
STREET ADDRESS 10905 SNAPPER CREEK ROAD
CITY-ST-ZIP CORAL GABLES, FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

7/5/06

Date

305 666-6273

Daytime Phone #