

2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 11, 2005
Secretary of State**

DOCUMENT# 404582

Entity Name: VILLAGE MARINA, INC.

Current Principal Place of Business:

396 TORPEY RD.
FT. PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

396 TORPEY RD.
FT. PIERCE, FL 34946

New Mailing Address:

FEI Number: 59-1843881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, WESLEY
396 TORPEY RD.
FT. PIERCE, FL 34946 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: TAYLOR, VIOLET
Address: BOX 396 TORPEY RD.
City-St-Zip: FT PIERCE, FL

Title: PD () Delete
Name: WESLEY, TAYLOR
Address: 396 TORPEY ROAD
City-St-Zip: FORT PIERCE, FL 34946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: TAYLOR, VIOLET
Address: 396 TORPEY RD.
City-St-Zip: FT PIERCE, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WESLEY TAYLOR

PD

07/11/2005

Electronic Signature of Signing Officer or Director

Date