FROM :

FAX NO. :

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90379 018 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 411792

1. Entity Name
BIG PINE KEY FISHING LODGE INC

40074659

Principal Place of Business	Mailing Address
P.O. BOX 513 MARKER 33-OVERSEAS HIGHWAY BIG PINE KEY, FL 33043	P.O. BOX 513 MARKER 33-OVERSEAS HIGHWAY BIG PINE KEY, FL 33043

DO NOT WRITE IN THIS SPACE

04252006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1455544
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GLADWELL, JOAN D
MARKER 33 OVERSEAS HWY
BIG PINE KEY, FL 33043

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	TD
NAME	GLADWELL, BRENDA A
STREET ADDRESS	MARKER 33 OVERSEAS HWY
CITY-ST-ZIP	BIG PINE KEY, FL
TITLE	SD
NAME	GLADWELL, JAY
STREET ADDRESS	MARKER 33 OVERSEAS HWY
CITY-ST-ZIP	BIG PINE KEY, FL
TITLE	D
NAME	GLADWELL, VICKI
STREET ADDRESS	MARKER 33 OVERSEAS HWY
CITY-ST-ZIP	BIG PINE KEY, FL
TITLE	PD
NAME	GLADWELL, JOAN D
STREET ADDRESS	MARKER 33 OVERSEAS HWY
CITY-ST-ZIP	BIG PINE KEY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Joan D Gladwell 4-26-06 305-872-2351
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR MANAGER OR OFFICER OR DIRECTOR — Date — Daytime Phone #