


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90030 001 ****61.25

DOCUMENT # 726326	
1. Entity Name AIR BOAT ASSOCIATION OF FLORIDA	

Principal Place of Business 25400 SW 8ST MIAMI FL 33157	Mailing Address 5860 SW 90 CT MIAMI FL 33173 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 59-2849731	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ERIWIN, CHARLES 5860 SW 90 CT MIAMI FL 33173	
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7. Name and Address of New Registered Agent	
Name Erwin, Charles	
Street Address (P.O. Box Number is Not Acceptable) 5860 SW 90 CT	
City MIAMI	FL Zip Code 33173

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POTTER, RICHARD 10010 SW 161 ST PERRINE FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ERWIN, CHARLES 5860 SW 90 CT MIAMI FL 33173 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SP Erwin, Charles 5860 SW 90 CT MIAMI FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POTTER, RICHARD 10010 SW 161 ST MIAMI FL 33157 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARREN, MIKE 18133 NW 19 ST HOLLYWOOD FL 33029 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PRICE, KEITH 12267 SW 195 TERR HOLLYWOOD FL 33029 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PO Price, Keith 12267 SW 195 Terr Miami, FL 33177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LD Dave Belman 3845 SW 103 Ave #101 Miami, FL 33165

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, 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: *Charles Erwin* **Charles Erwin Jan 30 2004 305-774-4267**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

~~#726326~~

54002750

(Box 11.)

SD
ERWIN, CHARLES
5860 SW 90 CT
MIAMI, FL. 33173

CHANGE

PD
PRICE, KEITH
12267 SW 195 TERR.
MIAMI, FL. 33177

CHANGE

VD
BALMAN, DAVE
3845 SW 103 AVE #101
MIAMI, FL 33165

ADDITION
