

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 31, 2005
Secretary of State**

DOCUMENT# 767085

Entity Name: CAPTAIN'S QUARTERS, INC.

Current Principal Place of Business:

2730 NE 14TH ST
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

724 PITTSTON AVE.
SCRANTON, PA 18505

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHON, MAURA
2730 N.E. 14TH ST.
FT. LAUDERDALE, FL 33304 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

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: ZAFER, RAY
Address: 2732 NE 14 STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: SD () Delete
Name: SWATKOWSKI, NICK
Address: 2730 NE 14TH ST
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D () Delete
Name: SCHEINER, GLENN
Address: 2734 NE 14TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: PTD () Delete
Name: SCHEINER, DIANNA
Address: 2734 NE 14TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAURA MAHON

PRES

01/31/2005

Electronic Signature of Signing Officer or Director

Date