


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 20, 2004 8:00 am**  
**Secretary of State**

08-20-2004 90003 042 \*\*\*150.00

|   |   |  |   |   |  |
|---|---|--|---|---|--|
| <b>DOCUMENT # F53525</b>  |   |  |   |    |  |
| 1. Entity Name<br><b>BETTY CORSON YACHT CHARTERS, INC.</b>  |   |  |   |   |  |
| Principal Place of Business<br><del>359 COMMONS DRIVE</del><br><del>PALM BEACH GARDENS, FL 33418</del> US   |   |  | Mailing Address<br><del>359 COMMONS DRIVE</del><br><del>PALM BEACH GARDENS, FL 33418</del> US |   |  |
| 2. Principal Place of Business<br><b>6320 Boca Del Mar Dr.</b><br>Suite, Apt. #, etc.<br><b>#401</b>  |   |  | 3. Mailing Address<br><b>6320 Boca Del Mar Dr.</b><br>Suite, Apt. #, etc.<br><b>#401</b>      |   |  |
| City & State<br><b>Boca Raton, FL</b>   |   |  | City & State<br><b>Boca Raton, FL</b>   |   |  |
| Zip<br><b>33433</b>   |   | Country<br><b>USA</b>  |   | 4. FEI Number<br><b>59-2144115</b>  |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |   |  |   | Applied For<br>Not Applicable   |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SIMPSON, COLLEN D</b><br><b>4244 N W 6TH STREET</b><br><b>DEERFIELD BEACH, FL 33442</b>   |   |  |   | 7. Name and Address of New Registered Agent<br>Name <b>Betty C. Corson</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>6320 Boca Del Mar Dr</b><br><b>#401</b><br>City <b>Boca Raton</b> <b>FL</b> Zip <b>33433</b> |  |
| 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.<br>SIGNATURE <i>Betty C. Corson</i> <b>Betty C. Corson - President</b> <b>8/16/04</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>  |   |  |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>Due by September 8, 2004</b>   |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   | 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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | V<br>CORSON, BETTY C<br><del>359 COMMONS DRIVE</del><br><del>PALM BEACH GARDENS, FL 33418</del> | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>President</b>  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | P<br>SIMPSON, COLLEEN D<br>4244 N W 6TH STREET<br>DEERFIELD BEACH, FL 33442                     | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>Vice President</b>   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 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 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: <i>Colleen D Simpson</i> <b>Vice President</b> <b>8/16/04</b> <b>954-428-0038</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>  |   |  |   |   |  |

**54069109**



07302004 Chg-P CR2E034 (10/03)

**BETTY CORSON  
YACHT  
CHARTERS, INC.**



539 Commons Drive, • Palm Beach Gardens, Florida 33418

Doc # FS 3525-  
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Attn: Corileen

To explain our late filing, we moved offices last year in December 2003. We never received our corporate papers. I called to change addresses for most all of our obligations - state & federal - but still did not receive our packet. Please waive the late fees and penalty.

Thank you,

Colleen Surpin