

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # F96000004286

1. Entity Name

LONGBOAT INVESTMENTS, LTD., INC. OF JERSEY, C.I.



Principal Place of Business

26 ROUNDWOOD PARK
HARPENDEN HERTS AL5 3AF ENGL,

Mailing Address

26 ROUNDWOOD PARK
HARPENDEN HERTS AL5 3AF ENGL,



04212004

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0249301

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

GLENDINNING, RENE M
1858 RINGLING BLVD
SARASOTA, FL 34236

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000129728
04/26/04-2004-005 150.00

10. OFFICERS AND DIRECTORS

TITLE DC
NAME MARSHALL, JOHN
STREET ADDRESS PO BOX 796, CHARLES HOUSE, CHARLES ST
CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD,

TITLE D
NAME DENNISON, MARSHALL
STREET ADDRESS PO BOX 796, CHARLES HOUSE, CHARLES ST
CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD,

TITLE D
NAME POWER, MICHAEL D
STREET ADDRESS PO BOX 796, CHARLES HOUSE, CHARLES ST
CITY-ST-ZIP ST HELIER, JERSEY JE4 5TD,

TITLE P
NAME KNEE, MICHAEL W
STREET ADDRESS 26 ROUNDWOOD PARK
CITY-ST-ZIP HARPENDEN HERTS AL5 3AF ENGL,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michael W. Knee MICHAEL W. KNEE 21st April 2004

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