

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F97000003637

1. Entity Name

**CANVAS SPECIALTIES & CUSTOM MARINE
FABRICATION, INC.**



Principal Place of Business

**18 HOLLYWOOD BLVD.
FORT WALTON BEACH, FL 32548**

Mailing Address

**18 HOLLYWOOD BLVD.
FORT WALTON BEACH, FL 32548**

DO NOT WRITE IN THIS SPACE



03272006 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3447443

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HELLMAN, DAVID J
18 HOLLYWOOD BLVD SW
FORT WALTON BEACH, FL 32548**

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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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

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

000000488969
04/12/06-80026-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HELLMANN, DAVID J
STREET ADDRESS	708 MARCIA CIRCLE
CITY-ST-ZIP	MARY ESTHER, FL 32569
TITLE	CVD
NAME	BOULET, TIMOTHY P
STREET ADDRESS	212 ROSEMARIE COURT
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548
TITLE	T
NAME	BOULET, RONALD B
STREET ADDRESS	36 CHELSEA DR.
CITY-ST-ZIP	FT. WALTON BEACH, FL 32548
TITLE	S
NAME	HELLMANN, CATHY L
STREET ADDRESS	708 MARCIA CIR.
CITY-ST-ZIP	MARY ESTHER, FL 32569
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 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.