## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G57594

Name:

Address:

City-St-Zip:

CELENTANO, DAVID

987 HILLSBORO MILE

HILLSBORO BEACH, FL 33062

FILED Apr 27, 2006 Secretary of State

Entity Nai	me: HOLIDA	Y ISLE RESORT	& MARINA, INC.				
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
84001 OVERSEAS HWY., ISLAMORADA, FL 33036					84951 OVERSEAS HWY., ISLAMORADA, FL 33036		
Current Mailing Address:				New Mailii	New Mailing Address:		
84001 OVERSEAS HWY., ISLAMORADA, FL 33036					987 HILLSBORO MILE HILLSBORO BEACH, FL 33062		
FEI Number:	: 59-2327305	FEI Number Ap	plied For ( )	FEI Number Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
CELENTANO, VINCENT D 84001 OVERSEAS HWY., ISLAMORADA, FL 33036 US				987 HILLSE	CELENTANO, VINCENT D 987 HILLSBORO MILE HILLSBORO BEACH, FL 33062 US		
The above in the State	named entity of Florida.	submits this stat	ement for the purp	oose of changing it	s regist	ered office or registered agent, or both,	
SIGNATURE: VINCENT D CELENTANO					04/27/2006		
Election Car		onic Signature of ng Trust Fund Cont	Registered Agent			Date	
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CELENTANO, 987 HILLSBO			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD ( LORICCO, RI 216 CROWN NEW HAVEN,	ST., 5TH FL.		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	Р (	) Delete		Title:	Р	(X) Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

CELENTANO, DAVID W

987 HILLSBORO MILE

HILLSBORO BEACH, FL 33062

SIGNATURE: DAVID W CELENTANO Ρ 04/27/2006