


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 MAY -4 PM 12: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G78189 1. Entity Name FLORIDA YACHT CHARTERS AND SALES, INC.	
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Principal Place of Business 390 ALTON RD SUITE 3 MIAMI BCH., FL 33139	Mailing Address 390 ALTON RD SUITE 3 MIAMI BCH., FL 33139
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DO NOT WRITE IN THIS SPACE



03142006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2372118	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent EVERHARD, SUSAN W. 1281 S VENETIAN WAY MIAMI, FL 33139

**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.	800075878528 06/06/06--01023--001 **650.00
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTDV EVERHARD, ROBERT 1281 S VENETIAN WAY MIAMI BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WILLIAMS, JEANNETTE 1416 MENOMINEE DR. OSHKOSH, WI
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP EVERHARD, SUSAN W. 1281 S VENETIAN WAY MIAMI BEACH, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.
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SIGNATURE: <u>Susan W. Everhard</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date <u>4/17/06</u> Daytime Phone # <u>(705) 532-8600</u>
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