2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H42692

1. Entity Name
JONATHAN NAYLOR (YACHTS) INCORPORATED

Principal Place of Business	Mailing Address
928 NE 20 AVE FORT LAUDERDALE, FL 33301	548 VICTORIA TERRACE FORT LAUDERDALE, FL 33301

02252005   Chg-P   CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country	Zip	Country

4. FEI Number
59-2514772
Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NAYLOR, JONATHAN 548 VICTORIA TERR FORT LAUDERDALE, FL 33301	Name Street Address (P.O. Box Number is Not Acceptable) City ____ **FL** Zip Code

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, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DP NAME NAYLOR, JONATHAN STREET ADDRESS 548 VICTORIA TERRACE CITY-ST-ZIP FT. LAUDERDALE, FL	☐ Delete	TITLE VP, T NAME Joan Naylor STREET ADDRESS 548 Victoria Terrace CITY-ST-ZIP Ft Lauderdale, FL 33301	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE S NAME Francis Keadrick White STREET ADDRESS 548 Victoria Terrace CITY-ST-ZIP Ft Lauderdale, FL 33301	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: _Joan Naylor_ VPT.   JOAN NAYLOR   MAR 7 2005   954 4621076
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #