

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H65602

FILED
Aug 11, 2004
Secretary of State

Entity Name: ADVENTURE SAILING CHARTERS, INC.

Current Principal Place of Business:

360 PINELLAS BAYWAY
STE. D (TOM MORRIS)
TIERRA VERDE, FL 33715 US

Current Mailing Address:

PO BOX 6662
BIG BEAR LAKE, CA 92315 US

New Principal Place of Business:

4905 34TH STREET
SUITE 4500
ST. PETERSBURG, FL 33715 US

New Mailing Address:

FEI Number: 65-0189162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TATICH, PHILIP
601 S. LAKE DESTINY RD.
SUITE 200
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

TATICH PHILIP
601 S. LAKE DESTINY RD.
SUITE 200
MAITLAND, FL 32751 US

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.

SIGNATURE: PHILIP TATICH

08/11/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ALLEN, GLENN T.,
Address: 650 RIVERSIDE AVE.
City-St-Zip: SUGARLOAF, CA 92386

Title: V () Delete
Name: SPICKARD, BRIAN,
Address: 6130 STONEY HILL ROAD
City-St-Zip: NEW HOPE, PA 18938

Title: S () Delete
Name: MORRIS, TOM
Address: 360 PINELLAS BAYWAY APT D
City-St-Zip: TIERRA VERDE, FL 33715

Title: V () Delete
Name: KLINE, ROBERT
Address: 4905 34TH ST SUITE #4500
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: GLENN T ALLEN

PT

08/11/2004

Electronic Signature of Signing Officer or Director

Date