

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # J42715

1. Entity Name
SHELL HARBOUR RESORT, INC.



Principal Place of Business
712 ST JOHNS AVE
PALATKA, FL 32177 US

Mailing Address
P.O BOX 1337
PALATKA, FL 32178 US

05 AUG 18 AM 8:46

DO NOT WRITE IN THIS SPACE



07252005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2768833

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

KOHUTH, R T
712 ST. JOHN'S AVE
PALATKA, FL 32177

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.

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 \$550.00
Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P KOHUTH, RUSSELL T 123 ELISE DR E PALATKA, FL 32131
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

900058786339
08/19/05--01050--015 **150.00

DO NOT WRITE
IN THIS SPACE

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: R.T. Kohuth
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-15-05
Date

Daytime Phone #

To/ Ms. Barbara Mitchell
Document Specialist

R.T. Kohuth
POB 1337
Palatka, 32178

8.03.05

Re: yours of 7.25.05

Ms. Mitchell

Thanks for pointing out my canceled cks to your dept. were for the previous yr.

As you see I've some of those 8 corps. for over 40 yrs. I was never late. Two or three yrs. ago the same thing happened; i.e. threat of dissolution. It was shown to someone in Tallahassee, via my atty, that I am usually very punctual.

I know I mailed (8) \$150 cks. in one envelope with the reports. I had my bank look for the canceled cks. None. The cks were timely mailed but either lost in the mails or lost in Tallahassee.

I've looked at each of my corporate IRS returns & deducted the corporate fee on each. I'm happy to fax you those if you like.

Synopsis: the cks. were mailed timely but not cashed; not my fault. I don't wish to have my corps. dissolved. Please find the compassion to accept \$150. per sans penalties as I'll go to my grave swearing the uncashed cks. were no fault of mine.

Thank you, R. T. Kohuth
home (386) 328-5441
fax 386 312-8339