

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # K10189**

1. Entity Name  
PELICAN CAR WASH OF COCOA BEACH, INC.



Principal Place of Business  
420 W. COCOA BEACH CAUSEWAY  
COCOA BEACH, FL 32931-3534

Mailing Address  
3960 S BANANA RIVER BLVD  
COCOA BEACH, FL 32931



01252006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2870747

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

RYNYON, GARY  
3960 S BANANA RIVER BLVD  
COCOA BEACH, FL 32931

**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 \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000412885  
02/10/06-80067-002 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PS  
RUNYAN, GARY  
3960 S BANANA RIVER BLVD  
COCOA BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
T  
RUNYAN, DEANNA  
3960 S BANANA RIVER BLVD  
COCOA BEACH, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VP  
ROMANO, JOHN  
420 W COCOA BEACH CSWY  
COCOA BEACH, FL 32931

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
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.

**SIGNATURE:**

*Gary Runyan* Gary Runyan Resident 1-29-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone \*