2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # M60140

1. Entity Name
CONCH YACHT COMPANY, INC.

Principal Place of Business	Mailing Address
87900 OLD HWY ISLAMORADA, FL 33036 US	PO BOX 972 ISLAMORADA, FL 33036 US

04302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0019684
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CAPT TED D'ESPOSITO
87900 OLD HWY
PLANTATION KEY
ISLAMORADA, FL 33036

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

000000151581
05/04/04-80053-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LODGE, ROBERT J.
STREET ADDRESS	15400 NW 34TH AVE
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	KELLER, BRUCE A.
STREET ADDRESS	980 NE 126TH ST.
CITY-ST-ZIP	MIAMI, FL 33161
TITLE	D
NAME	D'ESPOSITO, TED CAPT
STREET ADDRESS	87900 OLD HWY
CITY-ST-ZIP	ISLAMORADA, FL 33036
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Capt Ted D'Esposito 4-30-04 3058529615
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #