## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003094

Entity Name: CHARTER VACHT CLUB INC

DOWNER, MARLENE

NAPLES, FL 34109

9856 LUNA CIR.

Name:

Address: City-St-Zip: FILED May 01, 2006 Secretary of State

Littly Na	ME. CHARTER FACITI CLOB INC.			
Current P	rincipal Place of Business:	New Principal Place of Busines	s:	
1000 10TH NAPLES,				
Current M	lailing Address:	New Mailing Address:	New Mailing Address:	
187 ROUN NAPLES,	ND KEY CIR. FL 34112			
In accordan	: 30-0070456 FEI Number Applied For ( ace with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Age	did not receive the prior notice.	e of Status Desired ( ) stered Agent:	
	TERENCE J ND KEY CIR FL 34112 US			
	e named entity submits this statement fo e of Florida.	the purpose of changing its registered office or re	egistered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registere	d Agent [	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete SHORT, FRANK 6652 TRIDENT WAY NAPLES, FL 34108	Title: ( ) Change ( Name: Address: City-St-Zip:	) Addition	
Title: Name: Address: City-St-Zip:	D () Delete NABORS, LYNDA S 1400 POMPEI LN. #62 NAPLES, FL 34103	Title: ( ) Change ( Name: Address: City-St-Zip:	) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete FRESHWATER, JOHN 225 DENT DR. NAPLES, FL 34112	Title: ( ) Change ( Name: Address: City-St-Zip:	) Addition	
Title: Name: Address: City-St-Zip:	DS ( ) Delete HARRIS, TERENCE J 187 ROUND KEY CIR NAPLES, FL 34112	Title: ( ) Change ( Name: Address: City-St-Zip:	) Addition	
Title:	TD (X) Delete	Title: ( ) Change (	) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: TERENCE J HARRIS DS 05/01/2006