

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43162

**FILED  
Apr 14, 2004  
Secretary of State**

**Entity Name:** PENSACOLA CHARTER BOAT ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 1604  
PENSACOLA, FL 32597 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1604  
PENSACOLA, FL 32597 US

**New Mailing Address:**

**FEI Number:** 59-2883797      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WORK, E. GARY JR  
1940 ST MARY AVE  
PENASCOLA, FL 32501 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ANDREWS, JERRY  
Address: 751 PENSACOLA BEACH BLVD UNIT #11F  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: STD ( ) Delete  
Name: BEARD, EILENE  
Address: 711 S PALAFOX ST  
City-St-Zip: PENSACOLA, FL 32501

Title: VPD ( ) Delete  
Name: MADDEN, JOE  
Address: 6210 DENVER AVE  
City-St-Zip: PENSACOLA, FL 32526

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EILENE BEARD

CO

04/14/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date