## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 21, 2005 08:00 AM Secretary of State

ANNUAL REPORT				rei		05 00:00 A
DOCUMENT # P000003670.  1. Entity Name SHIPWRECK MOTEL, INC.		02			Secreta	ry of State
Principal Place of Business 237 OLD SAN CARLOS BLY FT. MYERS BCH, FL 3393	D.	tailing Address 237 OLD SAN CARLOS BLVD. FT. MYERS BCH, FL 33931		 		
DO NOT WRITE IN THIS SPACE			CE	02042005 No Ch 4. FEI Number 65-1009276 5. Certificate of Status Do	g-P CR2E	034 (10/03)  Applied For Not Applicable \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent  LEVY, KIM ESQ. — 2110 CLEVELAND AVE. FT. MYERS, FL 33901				DO NOT		
the obligations of registers SIGNATURE Signature, typed or i	ed agent.	purpose of changing its register  if applicable (NOTE, Registers  9. Election Campaign Final Trust Fund Contribution.	id Agent signature required		DATE	terminar with, and accept
CITY-ST-ZIP FT. MYERS  TITLE NAME RICHARD, STREET ADDRESS CITY-ST-ZIP FT. MYERS  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	N CARLOS BLVD. BCH, FL 33931	CTORS		DO NOT	WRIT	
NAME EXPECT ADORGES			J			

12. I hereby certify that the information supplied with this tiling 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 shalf lave the same legal effect as if made under eath; 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: \_

CITY-ST-ZIP

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-05

Daytime Phone #