

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 15, 2004 08:00 AM
Secretary of State**

DOCUMENT # P00000052987

1. Entity Name
SAFE HARBOUR YACHT MANAGEMENT, INC.



Principal Place of Business
**P.O. BOX 2228
JUPITER, FL 33468**

Mailing Address
**P.O. BOX 2228
JUPITER, FL 33468**



02042004 No Chg-P CR2E034 (10/03)

4. FES Number
65-1011631

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**NORRIS, MARGIE
16605 115TH AVE N.
JUPITER, FL 33478**

**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 the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**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**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	NORRIS, GEORGE (TAD)
STREET ADDRESS	16605 115TH AVE N.
CITY, ST, ZIP	JUPITER, FL 33478
TITLE	D
NAME	NORRIS, MARGIE
STREET ADDRESS	16605 115TH AVE N.
CITY, ST, ZIP	JUPITER, FL 33478
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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04/15/04-80007-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Margie Norris V.P. MARGIE NORRIS, V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4/4/04 561.7413091

DATE OF FILING