2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065643

City-St-Zip:

HORSESHOEBEACH, FL 32648

Entity Name: HORSESHOE BEACH MARINE INC.

FILED May 04, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P.O. BOX HORSESH	368 HOE BEACH, F	FL 32648			
Current Mailing Address:			New Mailing Address:		
P.O. BOX HORSESH	368 HOE BEACH, F	FL 32648			
FEI Number	: 59-3653884	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
CORNER	TY, TASHA L OF 1ST. & 2N HOE BEACH, F				
	named entity : e of Florida.	submits this statement for the բ	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SPRADLEY, TA) Delete ASHA L T & 2ND AVE E BEACH, FL 32648	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SPRADLEY, TA) Delete ASHA L T & 2ND AVE E BEACH, FL 32648	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SPRADLEY, TA) Delete ASHA L T & 2ND AVE E BEACH, FL 32648	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PRES () SPRADLEY, TA P.O. BOX 368) Delete NHA L HWY 351	Title: Name: Address:	() Change () Addition	

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

City-St-Zip:

SIGNATURE: TASHA SPRADLEY Ρ 05/04/2005