

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073653

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: FLORIDA KEYS SAILBOAT PARTNERS, INC.

## Current Principal Place of Business:

6031 GLENDALE DRIVE  
BOCA RATON, FL 33433

## New Principal Place of Business:

## Current Mailing Address:

6031 GLENDALE DRIVE  
BOCA RATON, FL 33433

## New Mailing Address:

FEI Number: 31-1752291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEVENS, ROBERT  
6031 GLENDALE DRIVE  
BOCA RATON, FL 33433 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLOOM, RONALD  
Address: 7105 HARBOUR LANDING  
City-St-Zip: ALPHARETTA, GA 30005

Title: D ( ) Delete  
Name: STEVENS, ROBERT  
Address: 6031 GLENDALE DR  
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete  
Name: GRACEY, MATTHEW  
Address: 1109 HARBOUR DRIVE  
City-St-Zip: DELRAY BEACH, FL 33433

Title: D ( ) Delete  
Name: BURGA, CHARLIE  
Address: 1474 HARBOUR SIDE DRIVE  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: CHANIN, RICHARD  
Address: 3065 NW 30TH WAY  
City-St-Zip: BOCA RATON, FL 33431

## 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:

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

SIGNATURE: ROBERT B. STEVENS

D

01/04/2008

Electronic Signature of Signing Officer or Director

Date