


FILED
Jun 12, 2006 8:00 am
Secretary of State

05-04-2006 90244 002 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P00000118048

1. Entity Name
 NOAH'S BOAT RENTALS, INC.




Principal Place of Business Mailing Address

3 MOSSY COVE DR 3 MOSSY COVE DR
 LORIDA, FL 33857 LORIDA, FL 33857

DO NOT WRITE IN THIS SPACE

66018413



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1065874	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

~~WOOD, EDMUND L~~ *Raymond Schirtz*
~~8426 WILTON DRIVE~~ *3 MOSSY COVE DR.*
~~WILTON MANORS, FL 33500~~ *LORIDA, FL 33857*

**DO NOT WRITE
 IN THIS SPACE**

8. The above named entity admits 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]* DATE: *6/9/06*

Signature typed or printed name of registered agent and 22817 applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD HEMINGWAY SCHIRTZ, ANN 3 MOSSY COVE DR. LORIDA, FL 33857
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SCHIRTZ, RAY 3 MOSSY COVE DR. LORIDA, FL 33857
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *[Signature]* VP DATE: *6/9/06* DAYTIME PHONE: *863-655-0119*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #