


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

05-04-2006 90244 002 ***150.00

DOCUMENT # P00000118048	
1. Entity Name NOAH'S BOAT RENTALS, INC.	

Principal Place of Business 3 MOSSY COVE DR LORIDA, FL 33857	Mailing Address 3 MOSSY COVE DR LORIDA, FL 33857
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DO NOT WRITE IN THIS SPACE




01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1065874	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
WOOD, EDMUND L 8426 WILTON DRIVE WILTON MANORS, FL 33595	Raymond Schirtz 3 MOSSY COVE DR. LORIDA, FL 33857

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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 	DATE 6/9/06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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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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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: 	UP	DATE 6/9/06	DAYTIME PHONE 863-655-0119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			