2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031948

9526 OLD WOODVILLE HWY

WOODVILLE, FL 32362

Address: City-St-Zip:

Entity Name: PIRATE CHARTERS & MARINE SERVICES INC.

FILED Apr 24, 2005 Secretary of State

Littly Na	IIIC. FIRATE	CHARTERS & WARINE SERVI	CLS, INC.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
2150 NATURAL WELLS RD WOODVILLE, FL 32362				10096 SPRING SINK RD WOODVILLE, FL 32362	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX WOODVIL	1232 LE, FL 32362				
FEI Number	: 59-3711888	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BENNETT, GEORGE S 2150 NATURAL WELLS RD WOODVILLE, FL 32362 US			10096 SPŔING SINK R	BENNETT, GEORGE S 10096 SPRING SINK RD WOODVILLE, FL 32362 US	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				04/24/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (BENNETT, GE 10096 SPRING WOODVILLE,	SINK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (BENNETT, SUI 10096 SPRING WOODVILLE,	S SINK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (BROWN, WILL) Delete JAM T	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: GEORGE S. BENNETT P 04/24/2005