# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 23, 2004 8:00 am**
**Secretary of State**
02-23-2004 90047 020 ***150.00

**54009031**

DOCUMENT # P02000021607

1. Entity Name
PELICAN BAY MOTORS AND MARINE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 2816 GULF BREEZE PKWY.<br>GULF BREEZE, FL 32563 | 2816 GULF BREEZE PKWY.<br>GULF BREEZE, FL 32563 |

02172004 Chg-P CR2E034 (10/03)

| 2. Principal Place of Business | | 3. Mailing Address | |
|---|---|---|---|
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

4. FEI Number 41-2044099 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

SMITH, CHARLES M JR.
2937 CORAL STRIP PKWY
GULF BREEZE, FL 32563

**7. Name and Address of New Registered Agent**

Name Severin, Carl F III
Street Address (P.O. Box Number is Not Acceptable) 6605 East Bay Blvd.
City Gulf Breeze FL Zip Code 32563

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: Carl F Severin III CARL F. SEVERIN III 02-17-2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2004 Fee will be $550.00**

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

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>SMITH, CHARLES M JR.<br>2937 CORAL STRIP PARKWAY<br>GULF BREEZE, FL 32563 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>SEVERIN, CARL F III<br>6605 EAST BAY BLVD.<br>GULF BREEZE, FL 32563 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Severin, Carl F III<br>6605 East Bay Blvd<br>Gulf Breeze, FL 32563 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V/T/S<br>Burns, Stephen P.<br>3014 Crittenden Dr.<br>Navarre, FL 32566 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify 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 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:** Carl F Severin III CARL F SEVERIN III 02-17-2004 850-932-8957
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #