## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **DOCUMENT # P02000087468** Jan 26, 2007 08:00 AM 1. Entity Name **Secretary of State** STEM TO STERN YACHT SERVICES, INC. Principal Place of Business Mailing Address 20 SOUTH ANDROS RD. KEY LARGO FL 33037 20 SOUTH ANDROS RD. KEY LARGO FL 33037 2. Principal Place of Business - No P.O Box # 3. Marling Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 35-2177312 Not Applicable Zıp Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo GREGG, MARK H Street Address (P.O. Box Number is Not Acceptable) 99101 OVERSEAS HWY. KEY LARGO FL 33037 City Zip Code 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 Signature, typed or printed name of registered agent and little is applicable, (NOTF: Registored Agent signature required when reinstaining) DATE FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition Change TITLE Defete 1004 GADDY, MICHAEL S U00000604709 NAMI NAME 20 SOUTH ANDROS RD. 01/30/07-80006-006 150.00 STEET LADDRESS STREET ADDRESS KEY LARGO FL 33037 CHY-SLZIP CHY-S1-7IP ши Defete THIE ☐ Change Addition NAMI STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-SI-7P THU Delete MILE Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CHY-ST-7IP CHY-SI-ZIP Delete ☐ Change ☐ Addition IIIII DHE NAMI NAME STREET ADDRESS STULL LADDIN SS CITY+S1+7IP CHY-S1-7IP Delete Addilion $\mathbf{D}\mathbf{H}$ Did ☐ Change NAME NAME. STREET ADDRESS STREET ANDRESS CITY-SI-ZIP CHY-SI-ZIP Change Addition 1007 Delete 11111 NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes 1 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.

CHAELS. GADDY

FILED