

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P02000129267

1. Entity Name

SAILFISH OF N.W. FLORIDA, INC.



FILED

06 JUN 14 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E034 (10/04)

Principal Place of Business

22 S.W. MIRACLE STRIP PKWY.
FORT WALTON BEACH FL 32548

Mailing Address

22 S.W. MIRACLE STRIP PKWY.
FORT WALTON BEACH FL 32548

2. Principal Place of Business

432 EGLIN PARKWAY N.E.

3. Mailing Address

432 EGLIN PARKWAY N.E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FORT WALTON BEACH, FL

City & State

FORT WALTON BEACH, FL

4. FEI Number

02-0663932

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCULLOUGH, ROBERT L
22 S.W. MIRACLE STRIP PKWY.
FORT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name MCCULLOUGH, ROBERT L

Street Address (P.O. Box Number is Not Acceptable)

432 EGLIN PARKWAY N.E.

FORT WALTON BEACH

FL

Zip Code 32547

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME MCCULLOUGH, ROBERT L ☐ Delete
STREET ADDRESS 603 GULF SHORE DR.
CITY-ST-ZIP DESTIN FL 32541

TITLE D
NAME BOYKO, STEPHEN P ☐ Delete
STREET ADDRESS 194 BIRCH ST.
CITY-ST-ZIP FREEPORT FL 32439

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME MCCULLOUGH, ROBERT L
STREET ADDRESS 432 EGLIN PARKWAY N.E.
CITY-ST-ZIP FORT WALTON BEACH, FL 32547

TITLE D ☐ Change ☒ Addition
NAME HARRELL, ROBERT
STREET ADDRESS 438 RIDGEWOOD CIRCLE
CITY-ST-ZIP DESTIN FL 32541

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

ROBERT L MCCULLOUGH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/06 (850) 581-3325

Date

Daytime Phone #