

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046774

FILED  
Feb 25, 2006  
Secretary of State

Entity Name: ISLAND MARITIME SERVICES, INC.

## Current Principal Place of Business:

2320 VOCTORIA  
FORT MYERS, FL 33901

## New Principal Place of Business:

2320 VICTORIA  
FORT MYERS, FL 33901

## Current Mailing Address:

P.O. BOX 1633  
FORT MYERS, FL 33902

## New Mailing Address:

FEI Number: 54-2109991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANSEN, EDWARD JR.  
2320 VICTORIA  
FT. MYERS, FL 33901 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: HANSEN, EDWARD J R  
Address: PO BOX 1633  
City-St-Zip: FORT MYERS, FL 33902

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: HANSEN, JOHN W  
Address: 2320 VICTORIA  
City-St-Zip: FORT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: EDWARD K. HANSEN, JR.

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02/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date