2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004
Secretary of State

DOCUMENT# P03000047722

Entity Name: ISLAND TIME BOATING CENTERS, INC.

Current Principal Place of Business:

464 BOUCHELLE DR #304
NEW SMYRNA BEACH, FL 321695414

New Principal Place of Business:

464 BOUCHELLE DR
#304
NEW SMYRNA BEACH, FL 321695414

Current Mailing Address:

464 BOUCHELLE DR #304
NEW SMYRNA BEACH, FL 321695414

New Mailing Address:

464 BOUCHELLE DR
#304
NEW SMYRNA BEACH, FL 321695414

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARIANDE, GUY A
464 BOUCHELLE DR #304
NEW SMYRNA BEACH, FL 321695414

Name and Address of New Registered Agent:

MARIANDE, GUY A
464 BOUCHELLE DR
#304
NEW SMYRNA BEACH, FL 321695414

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: 02/12/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MARIANDE, GUY A
Address: 464 BOUCHELLE DR #304
City-St-Zip: NEW SMYRNA BEACH, FL 321695414

Title: ST ( ) Delete
Name: REIKER, JUDITH A
Address: 464 BOUCHELLE DR #304
City-St-Zip: NEW SMYRNA BEACH, FL 321695414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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.

SIGNATURE: GUY A MARIANDE P 02/12/2004
Electronic Signature of Signing Officer or Director — Date