

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90071 033 ***150.00

DOCUMENT # P03000076222

1. Entity Name

CANAVERAL YACHT SALES, INC.



Principal Place of Business

357 IMPERIAL BLVD., #C-1
CAPE CANAVERAL FL 32953

Mailing Address

357 IMPERIAL BLVD., #C-1
CAPE CANAVERAL FL 32953

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

760736377

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

MIDGETT, FARRON
357 IMPERIAL BLVD., #C-1
CAPE CANAVERAL FL 32953

7. Name and Address of New Registered Agent

Name

FARRON MIDGETT

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

2700 Harbortown ~~MAINTENANCE~~ Dr.

City

MERRITT ISLAND

FL

Zip Code

32952

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

Farron Midgett FARRON MIDGETT, Pres.

4-19-04

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

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 ☒ Delete
NAME GILLIKIN, THOMAS
STREET ADDRESS 357 IMPERIAL BLVD., #C-1
CITY-ST-ZIP CAPE CANAVERAL FL 32953

TITLE D ☐ Delete
NAME MIDGETT, FARRON
STREET ADDRESS 357 IMPERIAL BLVD., #C-1
CITY-ST-ZIP CAPE CANAVERAL FL 32953

TITLE D ☒ Delete
NAME JOHNS, STEPHEN
STREET ADDRESS 357 IMPERIAL BLVD., #C-1
CITY-ST-ZIP CAPE CANAVERAL FL 32953

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 ☐ 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

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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:

Farron Midgett FARRON MIDGETT, Pres

4-19-04 321-453-4491

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #