

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000113441

1. Entity Name  
WAHOO BAY ANGLERS CORP.



Principal Place of Business  
2001 BAY DRIVE  
POMPANO BEACH, FL 33062

Mailing Address  
2001 BAY DRIVE  
POMPANO BEACH, FL 33062



01052005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
03-0529707

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BALENZANO, ESTER  
2001 BAY DRIVE  
POMPANO BEACH, FL 33062

**DO NOT WRITE  
IN THIS SPACE**

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

*Ester Balenzano* **ESTER BALENZANO**

4-25-2005

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	ORR, JOHN
STREET ADDRESS	3200 DOVER RD
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	STD
NAME	BALENZANO, ESTER
STREET ADDRESS	2001 BAY DR
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	STD
NAME	BALENZANO, LUCA
STREET ADDRESS	2001 BAY DR.
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	D
NAME	ORR, RUTH
STREET ADDRESS	3200 DOVER ROAD
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000333048

04/26/05-80082-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Ester Balenzano* **ESTER BALENZANO** 4-25-2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

957 762-0039