## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000036551

Entity Name: C&S BOATLIFT REPAIR & MAINTENANCE, INC.

FILED Apr 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

8600 N LAKE DASHA DR 2090 SW 71ST, TERRACE PLANTATION, FL 33324

SUITE H-2

**DAVIE, FL 33317** 

**Current Mailing Address: New Mailing Address:** 

2090 SW 71ST, TERRACE 8600 N LAKE DASHA DR PLANTATION, FL 33324

SUITE H-2

**DAVIE, FL 33317** 

FEI Number: 56-2438345 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SHERMAN, ELAINE BELLANDO, TERRI 2090 SW. 71ST TERRACE 8600 N LAKE DASHA DR. PLANTATION, FL 33324 US SUITE H-2

DAVIE, FL 33317 US

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: TERRI BELLANDO 04/03/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

SHERMAN, MARVIN Name: Name: SHERMAN, MARVIN 8600 N LAKE DASHA DR 2090 SW 71ST. TERRACE SUITE H-2 Address: Address:

City-St-Zip: PLANTATION, FL 33324 City-St-Zip: **DAVIE, FL 33317** 

( ) Delete Title: Title: VD (X) Change ( ) Addition CHRISTOPHER, RICHARD G Name: Name: CHRISTOPHER, RICHARD G

8600 N LAKE DASHA DR 2090 SW 71ST. TERRACE SUITE H-2 Address: Address: PLANTATION, FL 33324 DAVIE, FL 33317 City-St-Zip: City-St-Zip:

Title: Title:

(X) Delete () Change () Addition CHRISTOPHER, DEBRA Name: Name:

8600 N LAKE DASHA DR Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

SHERMAN, ELAINE Name: Name: Address: 8600 N LAKE DASHA DR Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip:

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: MARVIN SHERMAN PD 04/03/2006