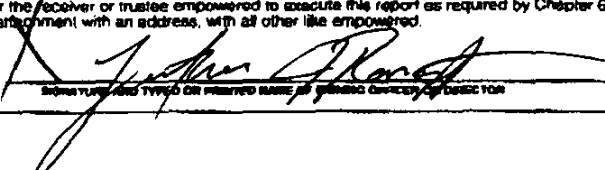


FILED
Jul 30, 2007 8:00 am
Secretary of State

04-13-2007 90163 037 ***158.75

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000158554		
1. Entity Name PENSACOLA HOUSE BOAT RENTALS INC.		
Principal Place of Business 1299 CALCUTTA DR. GULF BREEZE, FL 32563		Mailing Address 1299 CALCUTTA DR. GULF BREEZE, FL 32563
DO NOT WRITE IN THIS SPACE		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FEI Number 20-1776127
6. Name and Address of Current Registered Agent RONGSTAD, LUTHER J 1299 CALCUTTA DR. GULF BREEZE, FL 32563		Applied For ☐ Not Applicable
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when submitting)		
FILE NOW! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE	P	
NAME	RONGSTAD, LUTHER J	
STREET ADDRESS	1299 CALCUTTA DR.	
CITY-STATE-ZIP	GULF BREEZE, FL 32563	
TITLE		
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  _____ Signature and typed or printed name of officer, director, or authorized person		