

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000087306

1. Entity Name  
IVEY CUSTOM MARINE, INC.



Principal Place of Business  
4345 COQUINA DRIVE  
JACKSONVILLE BEACH, FL 32250 US

Mailing Address  
4345 COQUINA DRIVE  
JACKSONVILLE BEACH, FL 32250 US

FILED

07 SEP 17 PM 2:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



09102007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-3087596

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

IVEY, GEORGE W JR.  
4345 COQUINA DRIVE  
JACKSONVILLE BEACH, FL 32250

**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

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  
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 D  
NAME IVEY, GEORGE W JR.  
STREET ADDRESS 4345 COQUINA DRIVE  
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

TITLE  
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CITY-ST-ZIP

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000109696160  
09/20/07--01020--001 \*\*150.00

**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 SIGNING OFFICER OR DIRECTOR

George Ivey

9/10/07

904 241 2533

Date

Daytime Phone #