## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 17, 2008 08:00 AN **DOCUMENT # P05000160915 Secretary of State** 1. Entity Name SHALIMAR YACHT BROKERAGE, INC. Principal Place of Business Mailing Address 100 OLD FERRY ROAD **POST OFFICE BOX 189** SHALIMAR, FL 32579 SHALIMAR, FL 32579 01142008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2549161 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETERSON, PAULETTE DO NOT WRITE 100 OLD FERRY ROAD SHALIMAR, FL 32579 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) 500000859297 04/02/08-80017-009 150.00 \$5.00 May Be 9. Election Campaign Financing Fil.E NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME PETERSON, PAULETTE N STREET ADDRESS 346 SUDDUTH CIRCLE NE CITY-ST-ZIP FORT WALTON BEACH, FL 32548 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP . אודי IN THIS SPACE T ADDRESS -5T-2IP TITLE STREET ADDRESS CITY-ST-7IP TITLE

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 eath; 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:

NAME STREET ADDRESS CIFY-ST-ZIP

Laulet N. tachun

March 12,2008 850.651.0510

Daytime Phone #

FILED