

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000055483

FILED  
Jul 05, 2005  
Secretary of State

Entity Name: ALLEN BILLS MARINE, INC.

**Current Principal Place of Business:**

420 VAN BUREN ST.  
FT. MYERS, FL 33916 US

**New Principal Place of Business:**

**Current Mailing Address:**

420 VAN BUREN STREET  
FORT MYERS, FL 33916

**New Mailing Address:**

FEI Number: 65-0425399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BILLS, ALLEN D  
420 VAN BUREN STREET  
FORT MYERS, FL 33916 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BILLS, ALLEN D PD  
Address: 420 VAN BUREN STREET  
City-St-Zip: FT MYERS, FL 33916 US

Title: STD ( ) Delete  
Name: BILLS, HEATHER L STD  
Address: 4012 E RIVER DR  
City-St-Zip: FT MYRS, FL 33916

Title: VP ( ) Delete  
Name: BILLS, DAVID A VP  
Address: 1620 NW. 10TH STREET  
City-St-Zip: CAPE CORAL, FL 33993

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALLEN D. BILLS

PD

07/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date