2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000067861

1. Entity Name
WATERPROOF CHARTERS, INC.

Principal Place of Business	Mailing Address
86 RAINS COURT PONCE INLET, FL 32127	86 RAINS COURT PONCE INLET, FL 32127

03292006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3217519

☐ Applied F
☐ Not Appli

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

6. Name and Address of Current Registered Agent

GARRETT, TIMOTHY M.
86 RAINS COURT
PONCE INLET, FL 32127

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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 ac the obligations of registered agent.

SIGNATURE TMG Timothy M Garrett TMG 4/14/06
Signature, typed or printed name of registered agent and title if applicable. (If ATE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000519567 04/29/06-80072-002 150.00

10.	OFFICERS AND DIRECTORS
TITLE	PTD
NAME	GARRETT, TIMOTHY M
STREET ADDRESS	% 86 RAINS COURT
CITY-ST-ZIP	PONCE INLET, FL 32127
TITLE	VD
NAME	GARRETT, MARK
STREET ADDRESS	% 86 RAINS COURT
CITY-ST-ZIP	PONCE INLET, FL 32127
TITLE	SD
NAME	GARRETT, LISA P
STREET ADDRESS	% 86 RAINS COURT
CITY-ST-ZIP	PONCE INLET, FL 32127
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 informati 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 direc 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 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Timothy M Garrett Timothy Garrett 4/14/06 (386)756-4636