

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000010414	
1. Entity Name QUICKSILVER CHARTERS, INC.	

Principal Place of Business 99701 OVERSEAS HWY KEY LARGO, FL 33037	Mailing Address P.O. BOX 659 KEY LARGO, FL 33037
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DO NOT WRITE IN THIS SPACE



04082006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0465946	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

STARK, JOAN
136 BAHAMA RD.
KEY LARGO, FL 33037

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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 accept the obligations of registered agent

SIGNATURE _____ Signature, typed or printed name of registered agent and one if applicable (NOTE: Registered Agent signature required when re-registering) **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**

UN0000508086
04/27/06-80090-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STARK, JOAN P.O. BOX 659 N/A KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BERNARD, JOEL P.O. BOX 659 N/A KEY LARGO, FL
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 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, will call other file empowered.

SIGNATURE:  **JOAN STARK** **3/7/06** **305 394 2417**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #