

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000062074

Entity Name: PBP MARINA, INC.

FILED  
Apr 26, 2005  
Secretary of State

## Current Principal Place of Business:

5 GEIGER RD  
KEY WEST, FL 33040 US

## New Principal Place of Business:

## Current Mailing Address:

920 CAROLINE ST  
KEY WEST, FL 33040

## New Mailing Address:

5 GEIGER ROAD  
KEY WEST, FL 33040

FEI Number: 65-0515382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONGELLI, ROBERT  
5 GEIGER RD.  
KEY WEST, FL 33040 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DT ( ) Delete  
Name: MONGELLI, ROBERT  
Address: 920 CAROLINE STREET  
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete  
Name: TRIPP, PAUL  
Address: 231 MARGARET ST  
City-St-Zip: KEY WEST, FL 33040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT MONGELLI

DT

04/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date