

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000031880

Entity Name: PALM ISLAND MARINA, INC.

FILED
Mar 30, 2004
Secretary of State

Current Principal Place of Business:

7090 PLACIDA ROAD
CAPE HAZE, FL 33946

New Principal Place of Business:

Current Mailing Address:

7090 PLACIDA ROAD
CAPE HAZE, FL 33946

New Mailing Address:

FEI Number: 65-0669141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, TIMOTHY S
720 SOUTH ORANGE AVE.
SARASOTA, FL 34236 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: P () Delete
Name: LYNCH, W. TERRY
Address: 7090 PLACIDA RD
City-St-Zip: CAPE HAZE, FL

Title: VP () Delete
Name: BECKSTEAD, GARFIELD
Address: 7090 PLACIDA RD
City-St-Zip: CAPE HAZE, FL 33946

Title: ST (X) Delete
Name: BECKSTEAD, DEAN
Address: 7090 PLACIA RD
City-St-Zip: CAPE HAZE, FL 33946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BECKSTEAD, DEAN L
Address: 7090 PLACIDA RD
City-St-Zip: CAPE HAZE, FL

Title: ST (X) Change () Addition
Name: BECKSTEAD, GARFIELD
Address: 7090 PLACIDA RD
City-St-Zip: CAPE HAZE, FL 33946

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: DEAN L. BECKSTEAD

P

03/30/2004

Electronic Signature of Signing Officer or Director

Date