

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000107248 1. Entity Name PENNELL'S MARINE, INC.																																																																																																																													
Principal Place of Business 418 N RIVER DRIVE DEERFIELD BEACH, FL 33441			Mailing Address 418 N RIVER DRIVE DEERFIELD BEACH, FL 33441																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc. _____ City & State _____ Zip _____ Country _____			3. Mailing Address Suite, Apt. #, etc. _____ City & State _____ Zip _____ Country _____																																																																																																																										
4. FEI Number 65-0810331			Applied For <input type="checkbox"/> Not Applicable																																																																																																																										
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required																																																																																																																										
6. Name and Address of Current Registered Agent PENNELL, PATRICIA 418 N RIVER DRIVE DEERFIELD BEACH, FL 33441				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																																																									
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																										
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">D</td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PENNELL, JACK</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>418 NE RIVER DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DEERFIELD BEACH, FL 33441</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PENNELL, PATRICIA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>418 NE RIVER DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DEERFIELD BEACH, FL 33441</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PENNELL, MICHAEL G</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2531 S OCEAN BLVD #8</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BOCA RATON, FL 33432</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PENNELL, DAVID</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1100 SE 4TH AVE #28</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DEERFIELD BCH, FL 33441</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PENNELL, REGINALD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>424 NE RIVER RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DEERFIELD BCH, FL 33441</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 40%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	D	<input type="checkbox"/> Delete	NAME	PENNELL, JACK		STREET ADDRESS	418 NE RIVER DRIVE		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		TITLE	D	<input type="checkbox"/> Delete	NAME	PENNELL, PATRICIA		STREET ADDRESS	418 NE RIVER DRIVE		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		TITLE	D	<input type="checkbox"/> Delete	NAME	PENNELL, MICHAEL G		STREET ADDRESS	2531 S OCEAN BLVD #8		CITY-ST-ZIP	BOCA RATON, FL 33432		TITLE	D	<input type="checkbox"/> Delete	NAME	PENNELL, DAVID		STREET ADDRESS	1100 SE 4TH AVE #28		CITY-ST-ZIP	DEERFIELD BCH, FL 33441		TITLE	D	<input type="checkbox"/> Delete	NAME	PENNELL, REGINALD		STREET ADDRESS	424 NE RIVER RD		CITY-ST-ZIP	DEERFIELD BCH, FL 33441		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	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 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 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, with all other like empowered.																																																																																																																													
SIGNATURE: <u>Patricia Pennell</u> 1/20/05 954-426-2628 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																													