2006 FOR PROFIT CORPORATION

FILED Apr 05, 2006 8:00 am Secretary of State

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DOCUMENT # P99000014851 1. Entity Name CHARTER BOAT TWILIGHT, INC.								u o ~	04-05-2006	6 901 3 8	3 018 ***1	50.00
Principal Place of Business				Malling Address								
210A HARBOR BLVD			P	P.O. BOX 632								
DESTIN, FL 32541			C	DESTIN, FL 32540-0632								
									18111 1811 25111 BBM FBM	N ETITI KEN		DITTS IN STATE
2. Principal Place of Business			3.	3. Mailing Address								
				•				1 13 8 8 8 8 1 1 1 1 3				U U U U U U U U U U
Suite, Apt. #, etc.			-	Suite, Apt. #, etc.			01302006	Chg-P	CR2	034 (11/05)		
City & State			-	City & State				4. FEI Numbe	er		A	pplied For
·								59-3559621 Not Applica			ot Applicable	
Zip	Country		Zip C		Coun	ry		5. Certificate	of Status Desired		\$8.75 Ad Fee Require	
6. Name and Address of Current Registered Agent								7. Name and	Address of New R	egistere	d Agent	
						Name						
	MARY ANNE		Street Address (P.O. Box Number	er is Not Acceptable	9)				
201A HARBOR BLVD DESTIN, FL 32541							`					
0001111,1	2 020 17											
						City FL Zip Code						fe
The above named entity submits this statement for the purpose of changing its registered office or									b. /- db - Ol-44 Et-			
	named entity su tions of registered		for the p	ourpose of changing its	register	ed office or re	egister	ed agent, or bot	n, in the State of Fig	orida. I ai	n tamiliar with	, and accept
	-											
SIGNATURE.	Sometime bened or red	inted name of ragistered age	ot and title	Y sonicable (NOTE	Registere	d Agent signature	receiver)	when refrestation)		DATE		
	argineture, typed or pri	THE THE OF THE STATE OF THE STA	11 (# 10 ppp	парасаон. (1901)								
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.								00 May Be ed to Fees				
10. OFFICERS AND			D DIREC	DIRECTORS 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	DR/			☐ Delete	TITLE	E	DV				Change	Addition
NAME	WINDES, CH	WINDES, CHARLES K JR				AME Windes, Charles, K., J					, ,	
STREET ADDRESS						ET ADDRESS	210A Herbor Blvd Destin, FL 32541					
CITY-ST-ZIP	 	DESTIN, FL 32541					Dest	in, FL 32341			.	
TITLE	DST					I .					☐ Change	☐ Addilion
NAME STREET ADDRESS	WINDES, MARY ANNE 210A HARBOR BLVD STR				ET ADDRESS							
CITY-ST-ZIP					-ST-ZIP							
TITLE	DP	220 11		☐ Delete	ты						hange	Addition
NAME	_ 5,55				NAM	I .					nango	
STREET ADDRESS	852 KELL-AIRE DR. STR					ET ADDRESS						
CITY-ST-ZIP						-ST-ZIP						
TITLE				☐ Delete	TITLE	Ē .					☐ Change	🔲 Addilion
NAME					NAM	I .						
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP						-ST-ZIP						
TIFLE				☐ Delete	TITLE	I .					Change	Addition
NAME					NAM	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	1					-ST-ZIP						
	 			<u> </u>	TITLE						☐ Change	☐ Addition
TITLE	ı			Delete	INL	٠ ١						

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, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

NAME

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Charles K. Windes, Jr.

April 3, 2006

850-837-2320

Oate

Daytime Phone II