## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2004 08:00 AM Secretary of State

ANNOAL ILLOW						
DOCUMENT # P9900 1. Entity Name FLORIDA BOAT TIMESHARE						
Principal Place of Business	Mailing Address					
717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880	717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880					

Principal Place of Business Mailing Address 717 SIXTH STREET, S.W. 717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880								
THE TENTE CONTROL OF THE TENTE			<del></del>	04302004 No Chg-P CR2E034 (10/03)				
DO NOT WRITE IN THIS SPACE				65-097	4. FEI Number Applied For 65-0971146 Not Applied be			
				- B	of Status Desired	□ \$8.75 Fee Re	Additional equired	
6. Name and Address of Current Registered Agent EMRY, RICHARD 717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880		DO NOT WRITE IN THIS SPACE						
the obligati	named entity submits this statement for the cons of registered agent.  Signature, wheel or printed name of registered agency and the		ed office or registr		y	-30-04 DATE	with, and accept	
FIL	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		5.00 May Be ded to Fees	<del>1/000001</del> 05/04/04-1	1 <del>51340</del> 30044-002	150.00	
10.	OFFICERS AND DIRE	CTORS	. ,, ,	* . *				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EMRY, RICHARD 717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880					•	***	
TITLE NAME STREET ADDRESS CITY-ST-ZP	D THOMSON, GORDON 717 SIXTH STREET, S.W. WINTER HAVEN, FL 33880							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	antik that the information complied with thin					Light to	a the later to	

12. Thereby certify that the information supplied with this filling 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 print like empowered.

SIGNATURE AND TYPES OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4-30-04

Daytime Phone à