


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # V42573 1. Entity Name TAYLOR BOAT TRANSPORT ENTERPRISES, INC.	
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Principal Place of Business 5200 FOXHALL DRIVE SOUTH WEST PALM BEACH, FL 33417	Mailing Address 5200 FOXHALL DRIVE SOUTH WEST PALM BEACH, FL 33417
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04012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0338804	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TAYLOR, CHARLES E. 5200 FOXHALL DRIVE SOUTH WEST PALM BEACH, FL 33417
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DO NOT WRITE IN THIS SPACE

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 Charles E. Taylor (NOTE: Registered Agent signature required when reinstating) 4/11/05
Signature, typed or printed name of registered agent and title if applicable. DAY

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, CHARLES E. 5200 FOXHALL DR., S. W PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TAYLOR, LINDA B 5200 FOXHALL DRIVE S WEST PALM BEACH, FL 33417
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U00000303865 04/14/05-80021-007 150.00 DO NOT WRITE IN THIS SPACE
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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: Charles E. Taylor 4/11/05 (561) 687-9904
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #