


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # K06870
 1. Entity Name
DESTIN SEINE BOAT COMPANY



Principal Place of Business 9 CALHOUN AVE P.O. BOX 958 DESTIN, FL 32540	Mailing Address 9 CALHOUN AVE P.O. BOX 958 DESTIN, FL 32540
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DO NOT WRITE IN THIS SPACE



04252006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2869018	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent
**DESTIN, DEWEY E., JR.
 9 CALHOUN AVE
 DESTIN, FL 32541**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS DESTIN, DEWEY E., JR. 777 SPRING LAKE DR DESTIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DESTIN, MURIEL R 9 CALHOUN AVE DESTIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PATE, NINA D. 725 PLANET DR DESTIN, FL 32541
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 05/16/06-80018-012 150.00

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.

SIGNATURE: Dewey E. Dorsky **4-25-06 (850) 259-2801**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #