

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S50929

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: NEW NAUTICAL COATINGS, INC.

**Current Principal Place of Business:**

14805 49TH ST. N  
CLEARWATER, FL 33762

**New Principal Place of Business:**

**Current Mailing Address:**

14805 49TH ST. N  
CLEARWATER, FL 33762

**New Mailing Address:**

FEI Number: 59-3073054      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NORRIE, DAVID  
2181 34TH WAY  
LARGO, FL 33771      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C      ( ) Delete  
Name: NORRIE, JOHN  
Address: 8972 BAYWOOD PARK DRIVE  
City-St-Zip: SEMINOLE, FL

Title: P      ( ) Delete  
Name: NORRIE, DAVID  
Address: 2181 34TH WAY  
City-St-Zip: LARGO, FL 33771

Title: C.E.      ( ) Delete  
Name: NORRIE, ERIK  
Address: 10637 HARBORSIDE DR.  
City-St-Zip: LARGO, FL 33773

Title: S      ( ) Delete  
Name: HERNANDEZ, CARA  
Address: 8848 HERSHEY LANE  
City-St-Zip: SEMINOLE, FL 33777

Title: T      ( ) Delete  
Name: GARVER, CLYDE  
Address: 1255 STARKEY RD  
City-St-Zip: LARGO, FL 34641

Title: VP      ( ) Delete  
Name: REVIE, JASON  
Address: 14805 49TH STREET NORTH  
City-St-Zip: CLEARWATER, FL 33762

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID NORRIE

P

04/25/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date