## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED** Jan 27, 2006 08:00 AN

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DOCUMENT # 326468  1. Entity Name ECONOMY TACKLE, INC.			Secretary of State			
Principal Plac 6018 SOUTH SARASOTA F	ł Tamiami trail	Meiling Address 6018 SOUTH TAMIAMI TRAIL SARASOTA, FL 34231 US		-		
D	OO NOT WRITE	IN THIS SPA	CE	01112006 4. FEI Numbe 59-1204	No Chg-P (	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional
	6. Name and Address of Current R	orietared Acent		5, Certificate	of Status Desired	Fee Required
HURXTHAL, RICHARD A 6018 SO TAMIAMI TRAIL SARASOTA, FL 34231					NOT WR	
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  Signature, typed or printed have of registered agent and title if additionable.  (NOTE: Registered Agent signature required when Teinfitsting)  DATE						
After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	ncing \$5	.00 May Be led to Fees			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND D STD GOODWIN, MARK A 6018 S TAMIAMI TRAIL SARASOTA, FL 00000,	RECTORS				
TITLE NAME STREET ADDRESS CITY-ST-2IP	VPD HURXTHAL, RICHARD A 6018 SO TAMIAMI TRAIL SARASOTA, FL 00000,				) 00 <b>0</b> 0040 02/03/06-80	)2965 1029-006 150,00
TITLE HAME STREET ADDRESS CITY-ST-ZIP	PD GOODWIN, FRANK L 6018 SO TAMIAMI TRAIL SARASOTA, FL 00000,			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<del></del> · .		
TITLE NAME STREET ADDRESS GHY-ST-ZIP						

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 chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR