

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 539668

FILED
May 01, 2006
Secretary of State

Entity Name: ROGERS OUTBOARD SALES & SERVICE, INC.

Current Principal Place of Business:

1103 GARDEN ST.
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

1103 GARDEN ST.
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-1874798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, MARK
1130 OVERLOOK TR
TITUSVILLE, FL 32780 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MONTGOMERY, CRYSTAL
Address: 1130 OVERLOOK TT
City-St-Zip: TITUSVILLE, FL 32780

Title: P () Delete
Name: MONTGOMERY, MARK,
Address: 1130 OVERLOOK TERRACE
City-St-Zip: TITUSVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARK MONTGOMERY

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date