2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 553048

Entity Name: PELICAN PARTY BOATS, INC

FILED Feb 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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153 JUNE DRIVE 650 GLEN CHEEK DR

COCOA BEACH, FL 32931 CAPE CANAVERAL, FL 32920

Current Mailing Address: New Mailing Address:

153 JUNE DRIVE P O BOX 704

COCOA BEACH, FL 32931 CAPE CANAVERAL, FL 32920

FEI Number: 59-1876445 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NAGEL, ANGELA W
NAGEL, ANGELA W
153 JUNE DRIVE
NAGEL, ANGELA W
2010 NEWFOUND HARBOR I

153 JUNE DRIVE 2010 NEWFOUND HARBOR DR COCOA BEACH, FL 32931 US MERRITT ISLAND, FL 32952 US

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: 02/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVDT () Delete Title: PVDT (X) Change () Addition

Name:NAGEL, ANGELA WName:NAGEL, ANGELA WAddress:153 JUNE DRIVEAddress:2010 NEWFOUND HARBOR DR

City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: MERRITT ISLAND, FL 32952

Name: NAGEL, ANGELA W Name: NAGEL, ANGELA W

Address: 153 JUNE DRIVE Address: 2010 NEWFOUND HARBOR DR
City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD () Delete Title: () Change () Addition

 Name:
 MOORE, CHARLYNN N
 Name:

 Address:
 2010 NEWFOUND HARBOR DR
 Address:

 City-St-Zip:
 MERRITT ISLAND, FL 329522841
 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: CHARLYNN MOORE S 02/03/2006