

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002194

FILED  
Feb 06, 2006  
Secretary of State

Entity Name: SKIPPER CRESS YACHT SALES & SERVICES, INC.

## Current Principal Place of Business:

1019 Q AVE.  
SUITE B  
ANACORTES, WA 98221

## New Principal Place of Business:

1019 Q AVE  
SUITE B  
ANACORTES, WA 98221

## Current Mailing Address:

P.O. BOX 726  
ANACORTES, WA 98221

## New Mailing Address:

FEI Number: 91-1609038      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.  
1333 NORTH DUVALL STREET  
TALLAHASSEE, FL 32303 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: PCD ( ) Delete  
Name: CRESS, JAMES A  
Address: 25315 LAKE CAVANAUGH ROAD  
City-St-Zip: MOUNT VERNON, WA 98274

Title: V ( ) Delete  
Name: CRESS, JEFF  
Address: 702 E. WASHINGTON AVE.  
City-St-Zip: BURLINGTON, WA 98233

Title: ST ( ) Delete  
Name: CRESS, STEPHANIE  
Address: 25315 LAKE CAVANAUGH ROAD  
City-St-Zip: MOUN5 VERNON, WA 98274

Title: D ( ) Delete  
Name: MINOR, MICHELLE  
Address: 999 SOUTH SECTION STREET  
City-St-Zip: BURLINGTON, WA 98223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: CRESS, JEFF  
Address: 19400 CLARENCE LANE  
City-St-Zip: MOUNT VERNON, WA 98273

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

Title: D (X) Change ( ) Addition  
Name: MINOR, MICHELLE  
Address: 9193 CHUCKANUT DRIVE  
City-St-Zip: BURLINGTON, WA 98233

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: MICHELLE MINOR

D

02/06/2006

Electronic Signature of Signing Officer or Director

Date