2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006
Secretary of State

DOCUMENT# J58614

Entity Name: PELICAN MARINE CENTER, INC.

Current Principal Place of Business:

C/O GEORGE BERNETT
13323 US HWY 19
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

C/O GEORGE BERNETT
13323 US HWY 19
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-2830283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERNETT, GEORGE
6206 BAYSIDE DR.
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

BERNETT, GEORGE
10412 CREATION COURT
NEW PORT RICHEY, FL 34654 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: 01/19/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BERNETT, GEORGE,
Address: 6206 BAYSIDE DRIVE
City-St-Zip: NEW PORT RICHEY, FL

Title: S ( ) Delete
Name: FLOOD, CHARLES,
Address: 6347 GARLAND CT
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: FLOOD, KAREN
Address: 6347 GARLAND CT
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete
Name: BERNETT, LYNN
Address: 6206 BAYSIDE DR.
City-St-Zip: NEW PT. RICHEY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BERNETT, GEORGE,
Address: 10412 CREATION COURT
City-St-Zip: NEW PORT RICHEY, FL 34654

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

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

Title: D (X) Change ( ) Addition
Name: BERNETT, LYNN
Address: 10412 CREATION COURT
City-St-Zip: NEW PT. RICHEY, FL 34654

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: KAREN FLOOD D 01/19/2006
Electronic Signature of Signing Officer or Director — Date