


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K95783</b> 1. Entity Name NEW SMYRNA MARINE & TACKLE, INC.	
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Principal Place of Business 129 N. RIVERSIDE DR. NEW SMYRNA BEACH, FL 32168	Mailing Address 129 N. RIVERSIDE DR. NEW SMYRNA BEACH, FL 32168
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**DO NOT WRITE IN THIS SPACE**

01182006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2959127	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  ZONA, WILLIAM N. 129 NORTH RIVERSIDE DR. NEW SMYRNA BEACH, FL 32168
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**DO NOT WRITE  
IN THIS SPACE**

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

*William N. Zona* 1/18/06

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZONA, WILLIAM N. 201 INLET SHORE DRIVE NEW SMYRNA BCH., FL
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01/26/06-80054-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

*William N. Zona*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/06

DATE

386-428-7827

Daytime Phone #