

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L62435

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: MATTKE BROTHERS YACHT SERVICES, INC.

## Current Principal Place of Business:

601A COMMERCE DR  
PANAMA CITY BCH, FL 32408 US

## New Principal Place of Business:

## Current Mailing Address:

601A COMMERCE DR  
PANAMA CITY BCH, FL 32408 US

## New Mailing Address:

FEI Number: 59-3000927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTKE, BERT  
7813 N LAGOON DR 8-A  
PANAMA CITY BEACH, FL 32408 US

## Name and Address of New Registered Agent:

MATTKE, KATHY K TS  
303 BRYNN CT  
PANAMA CITY BEACH, FL 32408 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: KATHY K MATTKE

01/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete  
Name: MATTKE, STEVEN A.  
Address: 303 BRYNN CT  
City-St-Zip: PANAMA CITY BCH, FL 32408

Title: DP (X) Delete  
Name: MATTKE, BERT  
Address: 7813 N. LAGOON DRIVE 8-A  
City-St-Zip: PANAMA CITY BCH, FL

Title: TS ( ) Delete  
Name: MATTKE, KATHY  
Address: 303 BRYNN CT  
City-St-Zip: PANAMA CITY BCH, FL 32408

Title: P (X) Delete  
Name: MATTKE, STEVEN A  
Address: 303 BRYNN CT  
City-St-Zip: PANAMA CITY BCH, FL 32408

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVP (X) Change ( ) Addition  
Name: MATTKE, STEVEN A PRES  
Address: 303 BRYNN CT  
City-St-Zip: PANAMA CITY BCH, FL 32408

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

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 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: KATHY K MATTKE

TS

01/16/2009

Electronic Signature of Signing Officer or Director

Date