## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000107820

LAWSON, JAMES A

414 SEASAGE DRIVE #8

DELRAY BEACH, FL 33483

Name:

Address:

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Entity Name: DELRAY WATER SPORTS RENTALS, INC.								
Current Principal Place of Business:				New Principal Place of Business:				
	H OCEAN BLVI EACH, FL 334							
Current Mailing Address:				New Mailing Address:				
	SON STREET U EACH, FL 334							
FEI Number:	65-1058684	FEI Number Applied For ( )	FEI Number	Not Appl	icable ( )	Certi	ificate of Status Desired	( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
ARONSON, CAROLE WEINER & ARONSON, P.A. 102 NORTH SWINTON AVENUE DELRAY BEACH, FL 33444 US				RICHWAGEN, ALBERT 251 NE 17TH STREET DELRAY BEACH, FL 33444 US				
The above in the State		ubmits this statement for the pu	irpose of cha	anging i	ts registere	ed office o	or registered agent, o	r both,
SIGNATUR	E: ALBERT F	RICHWAGEN					04/30/2006	
	Electroni	c Signature of Registered Ager	nt				Date	
Election Carr	npaign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () LAWSON, CHAR 303 GLEASEON DELRAY BEACH	STREET UNIT 1				()Chan	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	VD () I RICHWAGEN, B 251 NE 17TH ST DELRAY BEACH					()Chan	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () I RICHWAGEN, AI 251 NE 17TH ST DELRAY BEACH					( ) Chan	ge ( ) Addition	
Title:	SD ()	Delete	Title		SD	(X) Chan	ae ( ) Addition	

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.

Name:

Address:

City-St-Zip:

LAWSON, JAMES A

303 GLEASON STREET #1

DELRAY BEACH, FL 33483

SIGNATURE: ALBERT RICHWAGEN TD 04/30/2006