


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000096409
 1. Entity Name
DESTINY POWERBOATS, INC.



Principal Place of Business
2603 ANDALUSIA BLVD
CAPE CORAL, FL 33909

Mailing Address
2603 ANDALUSIA BLVD
CAPE CORAL, FL 33909



03042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1148170 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GUARD, JOHN E
2603 ANDALUSIA BLVD
CAPE CORAL, FL 33909

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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	PD GUARD, PAUL P 422 SW 38TH AVE CAPE CORAL, FL 33991
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GUARD, JOHN E 2508 NW 43RD PL CAPE CORAL, FL 33993
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HORTON, RONALD T 1139 NW 2ND PL CAPE CORAL, FL 33993
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHEPARD, RICHARD J 5267 SKYLARK CT CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/04/05-80079-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 