2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2007 08:00 AN
Secretary of State

ANNUAL REPORT				Jan 12, 2007 08:00			
DOCU 1. Entity Nan	MENT # P020000466		Secretary of Sta				
	YACHT SALES, INC.						
Principal Plac	ce of Business	Mailing Address					
73 N. ROSCOE BOULEVARD PONTE VEDRA BEACH, FL 32082 73 N. ROSCOE BOULEVARD PONTE VEDRA BEACH, FL 32082			082				
DO NOT WRITE IN THIS SPA			^E	01092007	No Chg-P	CR2E034 (1	1/05)
			CE	4. FEI Numb 59-03:			Applied For Not Applicable
				5. Certificat	e of Status Desired		5 Additional equired
	6. Name and Address of Current Re	gistered Agent				-	
NEWMAN, CHARLES J				חח	NOT W	RITE	
73 N. ROSCOE BOULEVARD PONTE VEDRA BEACH, FL 32082			IN THIS SPACE				
			***************************************	IN	1 MIS SP	ACE	
8. The above the obligat	named entity submits this statement for ti tions of registered agent.	ne purpose of changing its register	ed office or register	ed agent, or bo	oth, in the State of Flo	orida. I am familia	r with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE, Registere	d Agent signature required	when reinstating)		DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution.			· — *-	00 May Be ed to Fees	U00000 01/12/07-1		150.00
10.	OFFICERS AND DI	RECTORS					
TITLE NAME	P NEWMAN, CHARLES J						
STREET ADDRESS	73 N. ROSCOE BOULEVARD						
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082						
TITLE NAME							
STREET ADDRESS							
CITY-ST-ZIP		<u> </u>					
TITLE NAME							
STREET ADDRESS				DΩ	NOT W	DITE	
CITY-ST-ZIP							
TITLE NAME				IN '	THIS SF	ACE	
STREET ADDRESS							
City-St-Zip							
TITLE Name							
STREET AGDRESS							
CITY-ST-ZIP							
TITLE							

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: _

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1/10/2007 (904)607-73 St