2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2007 8:00 am Secretary of State

DOCUMENT # P02000049445 1. Entity Name FOX PROPELLERS & MARINE TECHNOLOGIES, INC					04-18-2007 90188 025 ***150.00			
Principal Pla	ce of Business			4006814	Z			
Principal Place of Business 2625 6TH AVE S ST PETERSBURG, FL 33712 Mailing Address 2885 38JH ST N ST PETERSBURG, FL 33713			713					
Principal Place of Business - No P.O. Box #		3. Mailing Address 2625 1, # Am S						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u>v~ 3</u>	04162007	Chg-P	CR2E034 (12/	06)	
City & State		City & State St. Peters bu	ira FL	4. FEI Numbi			Applied For Not Applicable	
Zip	Country	Zip 33712	Country	5. Certificate	of Status Desired	□ \$8.75 Fee Req	Additional uired	
	6. Name and Address of Current			7. Name and	Address of New F	Registered Agent		
FOX, JOHN W III 2625 6TH AVENUE SOUTH ST.PETERSBURG, FL 33712				Name Street Address (P.O. Box Number is Not Acceptable)				
			City			Zio i	Code	
The above named entity submits this statement for the purpose of changing its register.				etarad agant, ov bo	th, in the State of El	FL		
	ations of registered agent.	or the purpose of changing its re	egistered office of regi	siereu ageni, or bo	in, in the state of m	опоа, гантанияату	viiis, and accept	
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE F	Registered Agent signature req	juired when reinstating)		DATE		
FII		9. Election Campaign	n Financing	\$5.00 May Be Added to Fees		DATE		
FII	Signature, typed or printed name of registered agent LE NOW!!! FEE IS \$150.00 lay 1, 2007 Fee will be \$550. OFFICERS AND	9. Election Campaign Trust Fund Contrib	n Financing	\$5.00 May Be Added to Fees	CHANGES TO OF	DATE	ORS IN 11	
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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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #