


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90096 023 ***150.00

DOCUMENT # P05000049414	
1. Entity Name NAUTICAL TUTOR II INC	

Principal Place of Business 4501 MANATEE AVENUE WEST #123 BRADENTON, FL 34209	Mailing Address 4501 MANATEE AVENUE WEST #123 BRADENTON, FL 34209
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2. Principal Place of Business 11701 W. Indian Circle Suite, Apt. #, etc.	3. Mailing Address 11701 W. Indian Circle Suite, Apt. #, etc.
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City & State Crystal River, FL	City & State Crystal River, FL
Zip 34428	Zip 34428
Country USA	Country USA

04012006 Chg-P CR2E034 (11/05)

4. FEI Number 20-2608590	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ZYCH, ALFRED A JR 4501 MANATEE AVENUE # 123 BRADENTON, FL 34209	
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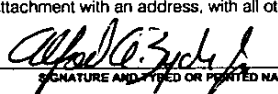
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 11701 W. Indian Circle City Crystal River FL Zip Code 34428	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE:  Alfred A Zych Jr Pres	DATE: 04.11.2006

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,P ZYCH, ALFRED A JR 4501 MANATEE AVENUE WEST, # 123 BRADENTON, FL 34209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS KURTZ, DEBORAH A 4501 MANATEE AVENUE WEST, # 123 BRADENTON, FL 34209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11701 W. Indian Circle Crystal River FL 34428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11701 W. Indian Circle Crystal River FL 34428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Alfred A Zych Jr Pres	DATE: 04.11.2006 DAYTIME PHONE #: 352.795.7568