## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 14, 2008 08:00 Al Secretary of State DOCUMENT # P05000158646 1. Entity Name DEGRAY YACHT SALES, INC. Principal Place of Business Mailing Address 110 SEAGATE RD 110 SEAGATE RD PALM BEACH, FL 33480 PALM BEACH, FL 33480 No Chg-P CR2E034 (11/05) 01092008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-4026958 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CRAFT, DAVID W ESQ 3418 POINSETTIA AVENUE WEST PALM BEACH, FL 33407 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DEGRAY, WILLIE NAME STREET ADDRESS 110 SEAGATE RD CITY-ST-ZIP PALM BEACH, FL 33480 TITLE 000000781937 01/15/08-80055-006 158.75 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby 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

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED