2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06274

1. Entity Name
CATALINA YACHTS, INC.

Principal Place of Business	Mailing Address
7200 BRYAN DAIRY ROAD SEMINOLE, FL 33777	21200 VICTORY BLVD WOODLAND HILLS, CA 91367

DO NOT WRITE IN THIS SPACE

04242007 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For
95-2546214	Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324

DO NOT WRITE 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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000739542
05/14/07-80031-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BUTLER, FRANK W.
STREET ADDRESS	21200 VICTORY BLVD
CITY-ST-ZIP	WOODLAND HILLS, CA

TITLE	VD
NAME	DOUGLAS, GERARD
STREET ADDRESS	21200 VICTORY BLVD
CITY-ST-ZIP	WOODLAND HILLS, CA

TITLE	STD
NAME	DAY, SHARON
STREET ADDRESS	21200 VICTORY BLVD
CITY-ST-ZIP	WOODLAND HILLS, CA

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _Sharon Day_   4/26/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #