FILED
Apr 03, 2006 8:00 am
Secretary of State
04-03-2006 90388 040 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P11543

1. Entity Name
PLEASURECRAFT MARINE ENGINE CO.

Principal Place of Business	Mailing Address
HIGHWAY 76 EAST P.O. BOX 369 LITTLE MOUNTAIN, SC 29075	HIGHWAY 76 EAST P.O. BOX 369 LITTLE MOUNTAIN, SC 29075

60023434

02282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
31-0859379
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LAYTON, ROY
740 INDUSTRY ROAD
LONGWOOD, FL 32750

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	FLETCHER, PAUL
STREET ADDRESS	RD. #2, BOX 439
CITY ST ZIP	CHAPIN, SC
TITLE	P
NAME	THURMAN, JOHN
STREET ADDRESS	RD. #2, BOX 373
CITY-ST-ZIP	CHAPIN, SC
TITLE	ST
NAME	FLETCHER, RUBLE
STREET ADDRESS	RD. #2, BOX 439
CITY-ST-ZIP	CHAPIN, SC
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: _____ 3/30/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JOHN S. THURMAN, PRES.