

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 28, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P93000086309**

1. Entity Name  
**ANDY'S FIBERGLASS BOAT REPAIR, INC.**



Principal Place of Business  
**12001 U.S. 41 SOUTH  
GIBSONTON, FL 33534**

Mailing Address  
**12001 U.S. 41 SOUTH  
GIBSONTON, FL 33534**



05302006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3215671**

Applied For
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**HRIVNAK, KAREN E  
12001 U.S. 41ST SOUTH  
GIBSONTON, FL 33534**

**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 \$550.00  
Due by September 6, 2006**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	HRIVNAK, ANDREW J
STREET ADDRESS	6115 ADAMS ST
CITY-ST-ZIP	GIBSONTON, FL

TITLE	V
NAME	MESSER, TERESA
STREET ADDRESS	342 HUMBERT ST NE
CITY-ST-ZIP	PALM BAY, FL 32907

TITLE	ST
NAME	HRIVNAK, KAREN E
STREET ADDRESS	6115 ADAMS ST.
CITY-ST-ZIP	GIBSONTON, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000572548  
07/28/06-80002-012 550.00

**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: *Karen E. Hrivnak / Secretary/President* 7/25/06