2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000080114

Entity Name: PALM BEACH YACHTS INTERNATIONAL, INC.

FILED Jan 11, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

PALM BEACH YACHTS INTERNATIONAL, INC. PALM BEACH YACHTS INTERNATIONAL, INC.

4200 NORTH FLAGLER DRIVE 4220 BROADWAY

WEST PALM BEACH, FL 33407 US WEST PALM BEACH, FL 33407 US

Current Mailing Address: New Mailing Address:

PALM BEACH YACHTS INTERNATIONAL, INC. PALM BEACH YACHTS INTERNATIONAL, INC.

4200 NORTH FLAGLER DRIVE 4220 BROADWAY

WEST PALM BEACH, FL 33407 US WEST PALM BEACH, FL 33407 US

FEI Number: 65-0616009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DONNA M MACPHAIL MACPHAIL, DONNA 4200 NORTH FLAGER DRIVE 4220 BROADWAY

WEST PALM BEACH, FL 33407 US WEST PALM BEACH, FL 33407 US

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.

SIGNATURE: DONNA MACPHAIL 01/11/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MACPHAIL, DONNA M Name: MACPHAIL, DONNA M

Address: 4200 NORTH FLAGLER DRIVE Address: 4220 BROADWAY

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 MACPHAIL, DUANE C
 Name:
 MACPHAIL, DUANE C

 Address:
 4200 NORTH FLAGLER DRIVE
 Address:
 4220 BROADWAY

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA MAC PHAIL P 01/11/2006