


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 04, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000007198  
 1. Entity Name  
 DECKS N SUCH MARINE, INC.



Principal Place of Business      Mailing Address  
 2 N.W. MAPLES ST                      P.O. BOX 327  
 FT. WALTON BEACH, FL 32548      US                      FT. WALTON BEACH, FL 32549

**DO NOT WRITE IN THIS SPACE**



05012006      No Chg-P      CR2E034 (11/05)

4. FEI Number 59-3421521	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 HARTZOG, PAUL EDWARD  
 981 N. BAYSHORE DR  
 VALPARAISO, FL 32580

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

**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 NAME STREET ADDRESS CITY-ST-ZIP	DPVT HARTZOG, PAUL EDWARD 981 N.BAYSHORE DR. VALPARAISO, FL 32580
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HARTZOG, CORREY L. 981 N.BAYSHORE VALPARAISO, FL 32580
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 05/20/06-80139-011 150.00

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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: Correy L. Hartzog      5/1/06 (850) 314-0444  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OFFICER OR DIRECTOR      Date      Daytime Phone #