

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000058362

FILED  
Feb 19, 2005  
Secretary of State

Entity Name: PRECISION MARINE TECHNOLOGIES INC.

**Current Principal Place of Business:**

US HWY 1 MM25  
SUMMERLAND KEY, FL 33042

**New Principal Place of Business:**

**Current Mailing Address:**

1051 CARIBBEAN DR.  
SUMMERLAND KEY, FL 33042

**New Mailing Address:**

FEI Number: 65-0740765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, GEORGE H  
1051 CARIBBEAN DR.  
SUMMERLAND KEY, FL 33042 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: WILSON, G. HOWARD  
Address: 1051 CARIBBEAN DR.  
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: VPT ( ) Delete  
Name: WILSON, KRISTYNE A  
Address: 1051 CARIBBEAN DR  
City-St-Zip: SUMMERLAND KEY, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: G. HOWARD WILSON

PS

02/19/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date