

**2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Apr 18, 2006 8:00 am**  
**Secretary of State**

04-18-2006 90079 046 \*\*\*150.00

DOCUMENT # P96000092128

1. Entity Name  
 YACHTEX MARINE PRODUCTS, INC.



Principal Place of Business: 1000 1ST AVE WEST, BRADENTON FL 34205  
 Mailing Address: POST OFFICE BOX 4014, ANNA MARIA FL 34216

40052040



2. Principal Place of Business: *same as above*  
 3. Mailing Address: *same as above*

1st MOORE CR2E034 (10/05)

City & State, Zip, Country fields for both principal and mailing addresses.

4. FEI Number: NO-T APPLICABLE  
 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: DARIN, RAYMOND J JR, 900 SOUTH BAY BOULEVARD, ANNA MARIA FL 34216  
 7. Name and Address of New Registered Agent: (Empty fields)

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: *Raymond J. Darin Jr* DATE: *4/10/06*

FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee Will Be \$550.00  
 Make Check Payable to Florida Department of State  
 9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO DARIN, RAYMOND J JR 900 SOUTH BAY BOULEVARD ANNA MARIA FL 34216	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Raymond J. Darin Jr* DATE: *4/10/06* (941) 545-7179  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #