


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000067955 1. Entity Name JPS STARBOARD TACK, INC.	
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Principal Place of Business 2076 CAVALLA ROAD VERO BEACH, FL 32963	Mailing Address 2076 CAVALLA ROAD VERO BEACH, FL 32963
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01132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0782184	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STRAZZULLA, JOSEPH 2076 CAVALLA ROAD VERO BEACH, FL 32963

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

**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

000000493750
04/20/06-80017-018 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOSEPH P. STRAZZULLA 2076 CAVALLA RD. VERO BCH., FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FRANK STRAZZULLA 4504 REDWOOD DR. FT. PIERCE, FL 34951
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP PHILLIP P. STRAZZULLA 4102 SABAL PALM DR. VERO BCH., FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP GODFREY ROCKEFELLER 41 BASKIN RD. LEXINGTON, MA 02173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: Joseph P. Strazzulla APRIL 4, 2006 772-461-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #