


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2006 8:00 am
Secretary of State

05-15-2006 90040 042 ***150.00

DOCUMENT # P99000006771 1. Entity Name BOATING EXPOSITIONS, INC.	
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Principal Place of Business PO BOX 834 BRADENTON, FL 34206	Mailing Address PO BOX 834 BRADENTON, FL 34206
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DO NOT WRITE IN THIS SPACE

40000000



05112006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3564905	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 MURPHY, JAMES J 630A PINELLAS BAYWAY SOUTH #3202 TIERRA VERDE, FL 33715
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**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: <u>James J. Murphy</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE: <u>4-30-06</u>
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBBINS, DALE S 6403 27TH AVE W BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MURPHY, JAMES J 630A PINELLAS BAYWAY S. #3202 TIERRA VERDE, FL 33715
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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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>4-30-06</u>	Daytime Phone #
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