2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# P99000037597

Entity Name: CHRIS LARSON SAILING, INC.

Current Principal Place of Business:

2625 TERRA CEIA BAY BLVD
#205
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

PO BOX 1026
PALMETTO, FL 34220

New Mailing Address:

FEI Number: 65-0914466 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LARSON, BURRITT R
2625 TERRA CEIA BAY BLVD
#205
PALMETTO, FL 34221 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: D ( ) Delete
Name: LARSON, BURRITT R
Address: 2625 TERRA CEIA BAY BLVD, #205
City-St-Zip: PALMETTO, FL 34221

Title: PD ( ) Delete
Name: LARSON, CHRISTOPHER B
Address: 869 HOLLY DRIVE SOUTH
City-St-Zip: ANNAPOLIS, MD 21401

Title: SD ( ) Delete
Name: LARSON, VICTORIA
Address: 869 HOLLY DRIVE SOUTH
City-St-Zip: ANNAPOLIS, MD 21401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: LARSON, CHRISTOPHER B
Address: 811 HOLLY DRIVE EAST
City-St-Zip: ANNAPOLIS, MD 21409

Title: SD (X) Change ( ) Addition
Name: LARSON, VICTORIA
Address: 811 HOLLY DRIVE EAST
City-St-Zip: ANNAPOLIS, MD 21409

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: VICTORIA R LARSON SECR 04/30/2006

Electronic Signature of Signing Officer or Director — Date