2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006
Secretary of State

DOCUMENT# P99000053941

Entity Name: AQUATIC RELEASE CONSERVATION, INC.

Current Principal Place of Business:

121 OGDEN BOULEVARD
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 730248
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3677572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DICK, LYNDON S
121 OGDEN BOULEVARD
DAYTONA BEACH, FL 32118 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:	PD	( ) Delete
Name:	DICK, LYNDON S	
Address:	121 OGDEN BOULEVARD	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	VPD	( ) Delete
Name:	DICK, JESS H	
Address:	121 OGDEN BOULEVARD	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	STD	( ) Delete
Name:	RAABE, KRISTIN E	
Address:	608 NORTH TYMBER CREEK ROAD	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	D	( ) Delete
Name:	HILL, DAVID H	
Address:	3929 S PENINSULA DR	
City-St-Zip:	WILBUR BY THE SEA, FL 32127	
Title:	D	( ) Delete
Name:	BAIAMONTE, JOHN B	
Address:	1211 LOST CREEK CT.	
City-St-Zip:	OSPREY, FL 34229	
Title:	D	( ) Delete
Name:	RAABE JR., EDWARD W	
Address:	608 N. TYMBER CREEK RD.	
City-St-Zip:	ORMOND BEACH, FL 32174	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: KRISTIN E. RAABE STD 02/03/2006

Electronic Signature of Signing Officer or Director — Date