## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # V69385**

Entity Name

DAIGLE'S MARINE SALES & SERVICE, INC.



FILED Jan 23, 2008 08:00 AN Secretary of State

Principal Place of Business

1240 SW 34TH ST.

1240 SW 341H ST. PALM CITY, FL 34990 US Mailing Address

1404 N.W. SPRUCE RIDGE DRIVE STUART, FL 34994-522 US



DO NOT WRITE IN THIS SPACE

01082008	No Chg-P	CR2E034 (11/05)

4. FEI Number 65-0365300		-	Applied For
00-0300300		Ł_	Not Applicable
5. Certificate of Status E	esired	\$8.75 Fee Re	5 Additional autred

6. Name and Address of Current Registered Agent

DAIGLE, DAN 1404 N.W. SPRUCE RIDGE DRIVE STUART, FL 34994

## 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. It am familiar with, and accept the obligations of registered agent.  SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FiL After M	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	<ol><li>Election Campaign Finar Trust Fund Contribution.</li></ol>	ncing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAIGLE, DAN 1404 N.W. SPRUCE RIDGE DR. STUART, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAIGLE, LAURA A. 1404 N.W. SPRUCE RIDGE DR. STUART, FL				000000792522 01/24/08-80010-021 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP					9. Florida Statutes I further certify that the information		

12. I hereby certify that the information supplied with this filing does not quality 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 addless, with all other like empowered.

SIGNATURE:

BIGNATURE AND TYPED OR MAINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/08

772-2206919

Daytime Phone #