

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000189

FILED
Mar 30, 2009
Secretary of State

Entity Name: TIDEWATER FINANCE COMPANY

Current Principal Place of Business:

6420 INDIAN RIVER RD.
VIRGINIA BEACH, VA 23464

New Principal Place of Business:

6420 INDIAN RIVER RD.
VIRGINIA BEACH, VA 23464 US

Current Mailing Address:

PO BOX 13306
CHESAPEAKE, VA 23325 US

New Mailing Address:

FEI Number: 54-1650513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: SANDLER, ART
Address: 448 VIKING DR., SUITE 200
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: VD () Delete
Name: SANDLER, STEVE
Address: 448 VIKING DR., SUITE 200
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: VT () Delete
Name: BENSON, NATHAN
Address: 448 VIKING DR., SUITE 200
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: S () Delete
Name: GOTLIEB, RAYMOND
Address: 448 VIKING DR., SUITE 200
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: V () Delete
Name: TOCCO, LARRY
Address: 6520 INDIAN RIVER RD
City-St-Zip: VIRGINIA BEACH, VA 23464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANDLER, ART
Address: 448 VIKING DR., SUITE 220
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: VD (X) Change () Addition
Name: SANDLER, STEVE
Address: 448 VIKING DR., SUITE 220
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: VT (X) Change () Addition
Name: BENSON, NATHAN
Address: 448 VIKING DR., SUITE 220
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: S (X) Change () Addition
Name: GOTLIEB, RAYMOND
Address: 448 VIKING DR., SUITE 220
City-St-Zip: VIRGINIA BEACH, VA 23454

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

I hereby certify that the information supplied with this filing does not qualify 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: LARRY TOCCO

V

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date