

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J42755

FILED
Feb 18, 2009
Secretary of State

Entity Name: FLORIDA AQUA FARMS, INC.

Current Principal Place of Business:

33418 OLD ST JOE ROAD
DADE CITY, FL 33525

New Principal Place of Business:

33418 OLD SAINT JOE ROAD
DADE CITY, FL 33525

Current Mailing Address:

33418 OLD ST JOE ROAD
DADE CITY, FL 33525

New Mailing Address:

33418 OLD SAINT JOE ROAD
DADE CITY, FL 33525

FEI Number: 59-2770681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFF, FRANK
33148 OLD ST. JOE RD.
DADE CITY, FL 33525 US

Name and Address of New Registered Agent:

HOFF, FRANK
33148 OLD SAINT JOE RD.
DADE CITY, FL 33525 US

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:

02/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOFF, AUTUMN
Address: 33148 OLD ST. JOE RD.
City-St-Zip: DADE CITY, FL

Title: VD () Delete
Name: HOFF, DUSTIN B
Address: 13823 12 STREET
City-St-Zip: DADE CITY, FL 33525

Title: STD () Delete
Name: HOFF, AUTUMN
Address: 33418 OLD ST JOE RD
City-St-Zip: DADE CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOFF, AUTUMN
Address: 33148 OLD SAINT JOE RD.
City-St-Zip: DADE CITY, FL 33525

Title: VD (X) Change () Addition
Name: HOFF, DUSTIN B
Address: 13823 12TH STREET
City-St-Zip: DADE CITY, FL 33525

Title: STD (X) Change () Addition
Name: HOFF, AUTUMN
Address: 33418 OLD SAINT JOE RD
City-St-Zip: DADE CITY, FL 33525

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: AUTUMN HOFF

PD

02/18/2009

Electronic Signature of Signing Officer or Director

Date