

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# N02000001241

Entity Name: MATLACHA MARINERS, INC.

Current Principal Place of Business:

4618 PINE ISLAND RD. NW.
#2
MATLACHA, FL 33993

New Principal Place of Business:

Current Mailing Address:

PO BOX 21
MATLACHA, FL 33993

New Mailing Address:

FEI Number: 02-0635879 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLLIVER, JERRY
4618 PINE ISLAND ROAD
#1
MATLACHA, FL 33993 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAULSBERY, TIM
Address: 5712 LINDEN LN.
City-St-Zip: BOKEELIA, FL 33922

Title: VD () Delete
Name: REED, WAYNE
Address: 13350 MORNING STARR LN.
City-St-Zip: BOKEELIA, FL 33922

Title: SD () Delete
Name: MAYHEW, RON
Address: 3651 EATAMARAN LN.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: TD () Delete
Name: JERVIS, CARL
Address: 2940 BUTTONWOOD KEY CT
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: D () Delete
Name: MCKEE, WILLIAM
Address: 2865 VELMA ST
City-St-Zip: MATLACHA, FL 33993

Title: ASD () Delete
Name: BYRON, FRED
Address: 4920 GULFGATE LN
City-St-Zip: ST. JAMES CITY, FL 33956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REED, WAYNE
Address: 13350 MORNING STAR LN
City-St-Zip: BOKEELIA, FL 33922

Title: VD (X) Change () Addition
Name: SCHARNBERGER, LARRY
Address: 3412 SW 7TH TERRACE
City-St-Zip: CAPE CORAL, FL 33991

Title: SD (X) Change () Addition
Name: SUTTON, LARRY
Address: 347 E NORTHSHORE DR
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: TD (X) Change () Addition
Name: CRUCKSHANK, ROY
Address: 5030 ISLAND ACRES CT.
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: ATD (X) Change () Addition
Name: BYRON, FRED
Address: 4920 GULFGATE LANE
City-St-Zip: ST JAMES CITY, FL 33956

Title: D (X) Change () Addition
Name: JERVIS, CARL
Address: 3366 STRINGFELLOW RD
City-St-Zip: ST. JAMES CITY, FL 33956

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED BYRON

Electronic Signature of Signing Officer or Director

ATD

01/14/2009

Date