

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 06, 2008  
Secretary of State

DOCUMENT# N04000008519

Entity Name: HURRICANE WATCH NET, INC.

**Current Principal Place of Business:**

10374-178TH CT S  
BOCA RATON, FL 33498

**New Principal Place of Business:**

**Current Mailing Address:**

10374-178TH CT S  
BOCA RATON, FL 33498

**New Mailing Address:**

FEI Number: 59-2927599      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PILGRIM, MICHAEL J  
10374-178TH CT S  
BOCA RATON, FL 33498      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: PC      ( ) Delete  
Name: PILGRIM, MICHAEL J  
Address: 10374-178TH CT S  
City-St-Zip: BOCA RATON, FL 33498

Title: D      ( ) Delete  
Name: LEFAVOUR, DAVID  
Address: 452 MEADOWLAKE RD.  
City-St-Zip: LOS LUNAS, NM 87031

Title: D      ( ) Delete  
Name: CHANTREE, PAUL W  
Address: RURAL ROUTE 5 DUNDALK ONTARIO  
City-St-Zip: CANADA, N0C1B0

Title: V      ( ) Delete  
Name: WRIGHT, ROGER M  
Address: 2322 MORGAN LANE  
City-St-Zip: INGLESIDE, TX 78362

Title: S/T      ( ) Delete  
Name: WEISENBURGER, DAN  
Address: 148 WESLEY ROAD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

**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:

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: MICHAEL J. PILGRIM

PRES

02/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date