2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2008
Secretary of State

DOCUMENT# N93000004802

Entity Name: HERNANDO BEACH BOATLIFT & IMPROVEMENTS, INC.

Current Principal Place of Business:

4049 HERMOSA BLVD
HERNANDO BEACH, FL 346073414 US

New Principal Place of Business:

Current Mailing Address:

4049 HERMOSA BLVD
HERNANDO BEACH, FL 346073414 US

New Mailing Address:

FEI Number: 59-3210129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOWERS, DON
3269 SEA GRAPE DR
HERNANDO BEACH, FL 34607 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:	BOWERS, DON	
Address:	3269 SEA GRAPE DR	
City-St-Zip:	HERNANDO BEACH, FL 34607	
Title:	VD	( ) Delete
Name:	WESTERBERG, THOMAS	
Address:	4025 AMBERJACK DR	
City-St-Zip:	HERNANDO BEACH, FL 34607	
Title:	SD	( ) Delete
Name:	MOORE, GLADYS	
Address:	4049 HERMOSA BLVD	
City-St-Zip:	HERNANDO BEACH, FL 34607	
Title:	TD	( ) Delete
Name:	WEST, JAMES	
Address:	4041	
City-St-Zip:	AMBERJACK DR, FL 34607	
Title:	D	( ) Delete
Name:	GARRETT, JIM	
Address:	4049 CROAKER DR	
City-St-Zip:	HERNANDO BEACH, FL 34607	
Title:	D	( ) Delete
Name:	TIBBETTS, MARK	
Address:	3185SEA GRAPE DR	
City-St-Zip:	HERNANDO BEACH, FL 34607	

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:		
Title:	D	(X) Change ( ) Addition
Name:	TIBBETTS, MARK	
Address:	3185 SEA GRAPE DR	
City-St-Zip:	HERNANDO BEACH, FL 34607	

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: GLADYS MOORE SD 04/19/2008

Electronic Signature of Signing Officer or Director — Date