2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2009
Secretary of State

DOCUMENT# P00000043162

Entity Name: MARINA ENTERPRISES, INC.

Current Principal Place of Business:

307 FLAGLER AVE
NEW SMYRNA BEACH, FL 32869

New Principal Place of Business:

Current Mailing Address:

C/O LOU BENOIST
132 WAVERLY PL
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3642965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENOIST, LOU
132 WAVERLY PL.
ORLANDO, FL 32806 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BENOIST, LOU
Address: 132 WAVERLY PL.
City-St-Zip: ORLANDO, FL 32806

Title: V ( ) Delete
Name: BENOIST, LEONEL
Address: 14661 CANOPY DR
City-St-Zip: TAMPA, FL 32626

Title: ST ( ) Delete
Name: BENOIST, JUDITH
Address: 132 WAVERLY PL.
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: BENOIST, LEONEL
Address: 14623 GALT LAKE DRIVE
City-St-Zip: TAMPA, FL 33626

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: LOU BENOIST PD 06/12/2009

Electronic Signature of Signing Officer or Director — Date