

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10114

FILED
Jan 06, 2009
Secretary of State

Entity Name: AMERICAN TANK & VESSEL, INC.

Current Principal Place of Business:

1005 GOVERNMENT ST.
MOBILE, AL 36604

New Principal Place of Business:

Current Mailing Address:

PO BOX 910
MOBILE, AL 36601

New Mailing Address:

FEI Number: 63-0830023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUTTS, WILLIAM J.,
Address: 1005 GOVERNMENT ST.
City-St-Zip: MOBILE, AL

Title: VP () Delete
Name: DAVIDSON, JAMES W.,
Address: 223 DICK HOBBY RD.
City-St-Zip: LUCEDALE, MS 39452

Title: ST () Delete
Name: HARRINGTON, C.A.,
Address: 6467 AUDUBON SQUARE N
City-St-Zip: MOBILE, AL 36695

Title: D () Delete
Name: ODOM, KENNETH R
Address: 1005 GOVERNMENT STREET
City-St-Zip: MOBILE, AL 36604

Title: V () Delete
Name: CUTTS, W.T.
Address: 15915 KATY FREEWAY, SUITE 290
City-St-Zip: HOUSTON, TX 77094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CUTTS, WILLIAM J.,
Address: 1005 GOVERNMENT ST.
City-St-Zip: MOBILE, AL 36604

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: VP (X) Change () Addition
Name: CUTTS, W.T.
Address: 15915 KATY FREEWAY, SUITE 290
City-St-Zip: HOUSTON, TX 77094

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: KENNETH R. ODOM

Electronic Signature of Signing Officer or Director

DIR

01/06/2009

Date