2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000035912

Address:

City-St-Zip:

2831 MARINA CR

LIGHTHOUSE POINT, FL 33064

FILED Feb 24, 2009 Secretary of State

Entity Nan	ne: LIGHTH	IOUSE POINT MARINA, INC.			
Current Principal Place of Business:			New Principal Place	of Business:	
2831 MARII LIGHTHOL	NA CR ISE POINT,	FL 33064			
Current Mailing Address:			New Mailing Addres	s:	
2831 MARINA CR LIGHTHOUSE POINT, FL 33064					
FEI Number:	65-0755519	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
B&C CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, 21ST FL 2 SOUTH BISCAYNE BLVD MIAMI, FL 33131 US			2211 NE 36TH STRE SUITE 203	JOHN GILLESPIE, PA 2211 NE 36TH STREET SUITE 203 LIGHTHOUSE POINT, FL 33064 US	
The above in the State	named entity of Florida.	submits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: JOHN GILLESPIE, PA				02/24/2009	
Electronic Signature of Registered Agent			t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	EDWARDS, I 2831 MARINA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CANADA, MA 2831 MARINA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VPD (SPIEKER, CH) Delete HRISTIAN	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MAUREEN CANADA PD 02/24/2009