

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 250094

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: RAFFIELD FISHERIES, INC.

## Current Principal Place of Business:

1624 GROUPER AVE  
POST ST. JOE, FL 32456

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 309  
POST ST. JOE, FL 32457

## New Mailing Address:

FEI Number: 59-0931791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

J. PATRICK FLOYD  
408 LONG AVENUE  
PORT ST JOE, FL 32456 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: P ( ) Delete  
Name: RAFFIELD, HAROLD  
Address: 6410 ALABAMA AVENUE  
City-St-Zip: PORT SAINT JOE, FL 32456

Title: VP ( ) Delete  
Name: RAFFIELD, EUGENE  
Address: 2103 CYPRESS AVENUE  
City-St-Zip: PORT SAINT JOE, FL 32456

Title: ST ( ) Delete  
Name: RAFFIELD, JOSEPH W  
Address: 311 MACE MARTIN ROAD  
City-St-Zip: WEWAHITCHKA, FL 32465

Title: AST ( ) Delete  
Name: RAFFIELD, RANDY C  
Address: 341 PLANTATION DRIVE  
City-St-Zip: PORT ST. JOE, FL 32456

## 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:

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: HAROLD RAFFIELD

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date