

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 280989

Entity Name: SEAHORSE MARINA, INC.

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

4135 KINGS HWY.
CHARLOTTE HARBOR, FL 33980 US

New Principal Place of Business:

Current Mailing Address:

22481 GLEN AVE.
PORT CHARLOTTE, FL 33980 US

New Mailing Address:

FEI Number: 59-0912802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FINNEGAN, MARTHA
22481 GLEN AVE.
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

FINNEGAN, MARTHA
22481 GLEN AVE.
PORT CHARLOTTE, FL 33980 US

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: MARTHA FINNEGAN

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: AIMINO, KATHLEEN F
Address: PO BOX 8368
City-St-Zip: FLEMING ISLAND, FL 32006

Title: VP () Delete
Name: FINNEGAN, MICHAEL,
Address: 1108 BELMAR AVE. N.W.
City-St-Zip: PORT CHARLOTTE, FL

Title: P () Delete
Name: FINNEGAN, MARTHA,
Address: 22481 GLEN AVE.
City-St-Zip: PORT CHARLOTTE, FL

Title: S () Delete
Name: FINNEGAN, MICHAEL,
Address: 1108 BELMAR AVE. NW
City-St-Zip: PORT CHARLOTTE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FINNEGAN, MICHAEL
Address: 1108 BELMAR AVE. N.W.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: P (X) Change () Addition
Name: FINNEGAN, MARTHA
Address: 22481 GLEN AVE.
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: S (X) Change () Addition
Name: FINNEGAN, MICHAEL
Address: 1108 BELMAR AVE. NW
City-St-Zip: PORT CHARLOTTE, FL 33948

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: MARTHA FINNEGAN

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date