2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007
Secretary of State

DOCUMENT# 341232

Entity Name: FLORIDA FLOATS, INC.

Current Principal Place of Business:

1813 DENNIS ST.
JACKSONVILLE, FL 32204 US

New Principal Place of Business:

Current Mailing Address:

BELLINGHAM MARINE
P.O. BOX 8
BELLINGHAM, WA 98227 US

New Mailing Address:

FEI Number: 59-1230548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAZILE, LEE V
1813 DENNIS STREET
JACKSONVILLE, FL 32204 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: V ( ) Delete
Name: GREENMAN, PHILIP A
Address: 1813 DENNIS STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D ( ) Delete
Name: KAZUMI, LLEDA
Address: 1001
City-St-Zip: BELLINGHAM, WA 98225

Title: SD ( ) Delete
Name: DAVIS, TINA M
Address: 1001 C STREET
City-St-Zip: BELLINGHAM, WA 98225

Title: D (X) Delete
Name: MASARU, MURATA
Address: 1001 C ST.
City-St-Zip: BELLINGHAM, WA 98225 US

Title: P (X) Delete
Name: BABBITT, EVERETT
Address: 3205 EAGLERIDGE WAY
City-St-Zip: BELLINGHAM, WA 98226 US

Title: C (X) Delete
Name: CHAMPMAN, PAW
Address: 1001 C STREET
City-St-Zip: BELLINGHAM, WA 98225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: BABBITT, JAMES E
Address: 1001 C STREET
City-St-Zip: BELLINGHAM, WA 98225 US

Title: CFO (X) Change ( ) Addition
Name: CHAPMAN, PAUL J
Address: 1001
City-St-Zip: BELLINGHAM, WA 98225 US

Title: SEC (X) Change ( ) Addition
Name: DEVRIES, TINA M
Address: 1001 C STREET
City-St-Zip: BELLINGHAM, WA 98225

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 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: TINA M. DEVRIES SEC 03/26/2007

Electronic Signature of Signing Officer or Director Date