

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 01, 2008
Secretary of State**

DOCUMENT# 383983

Entity Name: CONTINENTAL SHELF ASSOCIATES, INC.

Current Principal Place of Business:

8502 SW KANSAS AVE.
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

8502 SW KANSAS AVE.
STUART, FL 34997 US

New Mailing Address:

FEI Number: 64-0508505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, KEVIN
8502 SW KANSAS AVE
STUART, FL 34997 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

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: STEVENS, ROBERT C JR
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

Title: VP () Delete
Name: AYER, FREDERICK B II
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

Title: CEO () Delete
Name: PETERSON, KEVIN
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

Title: PRES () Delete
Name: GETTLESON, DAVID A
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

Title: TREA () Delete
Name: WHITE, DANIEL
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

Title: DIR () Delete
Name: MULCAHEY, ROBERT
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COB (X) Change () Addition
Name: STEVENS, SARAH S
Address: 8502 SW KANSAS AVE.
City-St-Zip: STUART, FL 34997 US

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

Title: () Change () Addition
Name:
Address:
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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: KEVIN PETERSON

CEO

04/01/2008

Electronic Signature of Signing Officer or Director

Date