2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 608339

FILED Apr 23, 2009 Secretary of State

Entity Name: SOULE MARINE ENTERPRISES, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1313 N. PA PENSACO	ACE BLVD. DLA, FL 32522				
Current Mailing Address:			New Mailing Address:		
1313 N. PA PO BOX 17 PENSACO					
FEI Number:	59-1884372	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SOULE, JOHN FAYETTE 1313 N. PACE BLVD. PENSACOLA, FL 32505 US			SOULE, JOHN FAYETTE 435 CREARY STREET. PENSACOLA, FL 32507 US		
The above in the State		ubmits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: JOHN F.S	OULE		04/23/2009	
	Electroni	c Signature of Registered Agen	t	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SOULE, JOHN F 435 CREARY ST PENSACOLA, F	Γ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () SOULE, SUSAN 435 CREARY S' PENSACOLA, F	Γ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () SOULE, JOHN F 1313 NORTH PA PENSACOLA,, F	ACE BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DIR (X)	Delete	Title:	() 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN F SOULE PD 04/23/2009

MENGE, RANDALL E

PENSACOLA,, FL 32503 US

1169 ELLISON

Name:

Address:

City-St-Zip: