

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712903

FILED
Jan 28, 2008
Secretary of State

Entity Name: THE PRIVATEER OF FORT MYERS BEACH, INC.

Current Principal Place of Business:

6500 ESTERO BLVD
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

6500 ESTERO BLVD
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 59-1204615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOENIE, WARREN
6500 E STERO BLVD
UNIT #1046
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

ANDERSON, LOIS
6500 E STERO BLVD
FORT MYERS BEACH, FL 33931 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: LOIS ANDERSON

01/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KLOSE, MARIOND
Address: 6500 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: TD () Delete
Name: BERKOWITZ, DARREL
Address: 6500 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VD () Delete
Name: BELFORD, JAMES
Address: 526 PINEHURST LANE
City-St-Zip: SCHERERVILLE, IN 46375

Title: SD () Delete
Name: SMITH, JENNY
Address: 3420 HIGHWAY NN
City-St-Zip: WEST BEND, WI 53095

Title: PD (X) Delete
Name: HOENIE, WARREN
Address: 701 MAGNOLIA DR
City-St-Zip: ST MARYS, OH 45885

Title: D (X) Delete
Name: WYSE, RICHARD
Address: 720 SPRUCE STREET
City-St-Zip: WAUSEON, OH 43567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BERKOWITZ, DARREL
Address: 6500 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VD (X) Change () Addition
Name: BELFORD, JAMES
Address: 526 PINEHURST LANE
City-St-Zip: SCHERERVILLE, IN 46375

Title: PD (X) Change () Addition
Name: HOENIE, WARREN
Address: 701 MAGNOLIA DRIVE
City-St-Zip: ST MARYS, OH 45885

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN HOENIE

D

01/28/2008

Electronic Signature of Signing Officer or Director

Date