

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716724

FILED
Apr 16, 2008
Secretary of State

Entity Name: BOATER SAFETY, INC.

Current Principal Place of Business:

5801 33RD AVE CT DR WEST
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 166
BRADENTON BEACH, FL 34217 US

New Mailing Address:

FEI Number: 20-3463698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FESKO, ROBERT P
731 OLD COMPASS RD
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

FESKO, ROBERT J
731 OLD COMPASS RD
LONGBOAT KEY, FL 34228 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: ROBERT J. FESKO

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TSD () Delete
Name: BARTLETT, ROBERT
Address: 9 CHURCH AVE
City-St-Zip: BRADENTON BEACH, FL 34217

Title: D () Delete
Name: PELCHAR, SHIRLEY
Address: 400 E CONFERENCE DR
City-St-Zip: BOCA RATON, FL 33486

Title: ST () Delete
Name: ADAMS, MARTHA
Address: 1708 76TH AVE WEST
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: ALEXANDER, JOHN
Address: 6107 55TH AVE CIR EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: FESKO, ROBERT
Address: 731 OLD COMPASS RD
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D () Delete
Name: MORELLO, JAN
Address: 2008 84TH ST CIR NW
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: ROBERT J. FESKO

PRES

04/16/2008

Electronic Signature of Signing Officer or Director

Date