


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # 726326	
1. Entity Name AIR BOAT ASSOCIATION OF FLORIDA	

Principal Place of Business 25400 SW 8ST MIAMI, FL 33157	Mailing Address PO BOX 650611 MIAMI, FL 33265 US
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DO NOT WRITE IN THIS SPACE



02192008 No Chg-NP CR2E037 (4/08)

4. FEI Number 59-2849731	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ERWIN, CHARLES
6145 SW 85 AVE
MIAMI, FL 33143**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000856847 03/28/08-80027-019 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POTTER, RICHARD 10010 SW 181 ST PERRINE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ERWIN, CHARLES 6145 SW 85 AVE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRICE, KEITH 12267 SW 195 TERR MIAMI, FL 33177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BALMEN, DAVE 3845 SW 103 AVE #101 MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles Erwin **March 11, 2008** **305-607-7706**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #