2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#757636

FILED Apr 03, 2008 Secretary of State

Entity Name: THE BOARDWALK CAPER BOATING ASSOCIATION, INC.

	rincipal Place	of Business:	New Principal Place of Business:
	N CARLOS BL\ S BEACH, FL		
Current M	ailing Addres	s:	New Mailing Address:
	N CARLOS BLV ERS, FL 33908		
FEI Number:	59-2214954	FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of C	urrent Registered Age	nt: Name and Address of New Registered Agent:
15751 SAN FORT MYI	OR & ASSOCIANI CARLOS BL DERS, FL 33908	/D#8 [°] 3 US	
	named entity s of Florida.	submits this statement fo	r the purpose of changing its registered office or registered agent, or both,
SIGNATU			
	Electron	ic Signature of Registere	ed Agent Date
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Name: Nddress:	CALDER, DONA	RLOS BLVD. #913	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:	CALDER, DONA 18092 SAN CAR FT MYERS BEA	ALD RLOS BLVD. #913 ACH, FL 33931 Delete IPER FAKE AVE	Name: Address:
Name: Address: City-St-Zip: Fitle: Name: Address:	CALDER, DONA 18092 SAN CAF FT MYERS BEA D () SARRETT, KEN 4020 CEASAPE HAMPTON, VA	ALD RLOS BLVD. #913 ACH, FL 33931 Delete PPER PAKE AVE 23669 Delete S DW COURT	Name: Address: City-St-Zip: Title: P (X) Change () Addition Name: SARRETT, KEMPER Address: 4020 CEASAPEAKE AVE
Address: City-St-Zip: City-St-Zip: City-St-Zip: Citle: Address: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: Address: Address:	CALDER, DONA 18092 SAN CAF FT MYERS BEA D () SARRETT, KEN 4020 CEASAPE HAMPTON, VA T () SIEGEL, JAMES 129 MARBELLO ST MARYS, OH	ALD RLOS BLVD. #913 ACH, FL 33931 Delete IPER AKE AVE 23669 Delete S DV COURT 45885 Delete I/AS NE	Name: Address: City-St-Zip: Title: P (X) Change () Addition Name: SARRETT, KEMPER Address: 4020 CEASAPEAKE AVE City-St-Zip: HAMPTON, VA 23669 Title: () Change () Addition Name: Address:
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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: C.R. MIDDLETON MGR 04/03/2008