2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16015

1544 SHERIDAN STREET

JACKSONVILLE, FL

Address:

City-St-Zip:

RIVER MARINE SALES & SERVICE INC.

FILED Jan 07, 2009 Secretary of State

Entity Nai	me: RIVER N	MARINE SALES & SERVICE,	INC.		
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3919 MOR JACKSON	RTON ST WILLE, FL 32	217			
Current Mailing Address:			New Mailing Address:		
3919 MOR JACKSON	RTON ST WILLE, FL 32	217			
FEI Number:	: 59-2179766	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
6703 PÓT	HARLES E TSBURG DR. IVILLE, FL 32				
	named entity e of Florida.	submits this statement for the	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	Agent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (LYONS, CHAR 6703 POTTSB JACKSONVILL	URG DR.	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title:	VD () Delete ARD	Title: VD ((X) Change()Addition	

Address:

420 HOLLY AVE

City-St-Zip: JACKSONVILLE, FL 32211 US

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.

SIGNATURE: CHARLES E LYONS PD 01/07/2009