2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F39512

FILED Jan 09, 2007 Secretary of State

Entity Name: BUCCANEER ROPE CO. OF FLORIDA, INC.

Current Principal Place of Business:		New I Interput I lace	New Principal Place of Business:	
22319 AL I SCOTTSB	HWY 79 ORO, AL 35768	US		
Current M	ailing Address:		New Mailing Addres	ss:
22319 AL I SCOTTSB	HWY 79 ORO, AL 35768	US		
El Number	: 59-2115345 I	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cur	rent Registered Agent:	Name and Address	of New Registered Agent:
BEYER, K	ATHY			
	DALAY POINT RI ATER, FL 33767	O US		
CLEARWA	ATER, FL 33767	US	ourpose of changing its registere	ed office or registered agent, or both,
CLEARWA The above n the State	ATER, FL 33767 named entity sub e of Florida.	US	ourpose of changing its registere	ed office or registered agent, or both,
CLEARWA The above n the State	ATER, FL 33767 named entity sub e of Florida. RE:	US		ed office or registered agent, or both, Date
CLEARWA The above n the State	named entity sub e of Florida. RE:	US mits this statement for the ເ		
CLEARWA The above in the State BIGNATUR Election Car	named entity sub e of Florida. RE:	US mits this statement for the positions of Registered Against Fund Contribution ().	ent	
CLEARWA The above nother State BIGNATUA Election Car DFFICERS Title: Jame: Address:	named entity sub e of Florida. RE: Electronic :	US mits this statement for the positions of Registered Agrant Fund Contribution (). RS: lete L M	ent	Date
CLEARWA The above in the State BIGNATUR Election Car	named entity subsection of Florida. RE: Electronic Standard Transpaign Financing Transpaign Financing Transpaign Florida (1) De POCKMAN, DANIE 22319 AL HWY 79	US mits this statement for the position of Registered Age ust Fund Contribution (). RS: lete L M 35768 US	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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.