2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F68794

Entity Name: THOMAS MARINE CONSTRUCTION, INC.

FILED Jan 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8999 HIGH COTTON LANE FT. MYERS, FL 33905

Current Mailing Address: New Mailing Address:

8999 HIGH COTTON LANE FT. MYERS, FL 33905

FEI Number: 59-2163377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, DEAN C
8999 HIGH COTTON LANE
FT MYERS, FL 33905 US
SHIMP, KEVIN C
8999 HIGH COTTON LANE
FT MYERS, FL 33905 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: KEVIN C. SHIMP 01/02/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: THOMAS, DEAN C, Name: SHIMP, KEVIN C

 Address:
 8999 HIGH COTTON LN
 Address:
 8999 HIGH COTTON LN

 City-St-Zip:
 FORT MYERS, FL 33905
 City-St-Zip:
 FORT MYERS, FL 33905

Title: D () Delete Title: DVP (X) Change () Addition Name: THOMAS, DONNA M. Name: SCHOONVELD, WILLIAM

Address: 1860 MARINA CIRCLE Address: 300 IONIA AVENUE, NW City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: GRAND RAPIDS, MI 49503

Title: DS () Delete Title: S (X) Change () Addition

 Name:
 CLARK, GAYLE
 Name:
 CLARK, GAYLE

 Address:
 17770 RANCHO 78 DR
 Address:
 17770 RANCHO 78 DR

 City-St-Zip:
 ALVA, FL 33920
 City-St-Zip:
 ALVA, FL 33920

Title: VP () Delete Title: DT (X) Change () Addition

 Name:
 SHIMP, KEVIN C
 Name:
 LABARGE, JOHN

 Address:
 9951 CYPRESS LAKE DR
 Address:
 300 IONIA AVENUE, NW

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 GRAND RAPIDS, MI 49503

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: KEVIN SHIMP P 01/02/2008