

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G27892

Entity Name: FLORIDA OFFSHORE, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

134 MARLIN CIRCLE
PANAMA CITY BEACH, FL 32411

New Principal Place of Business:

Current Mailing Address:

P O BOX 10526
PANAMA CITY, FL 32404

New Mailing Address:

FEI Number: 59-2793439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, CARL S.
134 MARLIN CIR
PANAMA CITY, FL 32411 US

Name and Address of New Registered Agent:

ANDERSON, CARL S
134 MARLIN CIR
PANAMA CITY, FL 32411 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: CARL S ANDERSON

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ANDERSON, JANA H.,
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: P () Delete
Name: ANDERSON, CARL,
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ANDERSON, JANA H
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32411 US

Title: P (X) Change () Addition
Name: NUNN, BRETT A
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32411 US

Title: VP () Change (X) Addition
Name: MILES, SHAY A
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY, FL 32411 US

Title: T () Change (X) Addition
Name: ANDERSON, CARL S
Address: 134 MARLIN CIRCLE
City-St-Zip: PANAMA CITY, FL 32411 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: JANA H ANDERSON

S

02/04/2009

Electronic Signature of Signing Officer or Director

Date