2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G73516

Apr 07, 2009 Secretary of State

Entity Name: BAY MARINER SHOPS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 19709 GULF BLVD. INDIAN SHORES, FL 33785 US **Current Mailing Address: New Mailing Address:** 19709 GULF BLVD. INDIAN SHORES, FL 33785 US FEI Number: 59-2349134 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: MERKLE, REBECCA M MCCORKLE, MELISSA M 516 CREST AVE S 906 E GILCHRIST ST CLEARWATER, FL 33756 US PLANT CITY, FL 33563 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: MELISSA MCCORKLE 04/07/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MCCORKLE, MELISSA M MS Name: Name: 906 E GILCHRIST ST Address: Address: City-St-Zip: PLANT CITY, FL 33563 City-St-Zip: Title: ٧S Title: () Delete () Change () Addition Name: MERKLE, REBECCA M MRS Name: 516 CREST AVE SO Address: Address: CLEARWATER, FL 33765 City-St-Zip: City-St-Zip: () Delete Title: Title: SEC () Change () Addition MCCORKLE, MELISSA M MS Name: Name: 906 E GILCHRIST ST Address: Address: City-St-Zip: PLANT CITY, FL 33563 US City-St-Zip: Title: () Delete Title: () Change () Addition MERKLE, REBECCA M MRS Name: Name: Address: 516 CREST AVE SO Address: City-St-Zip: CLEARWATER, FL 33765 US City-St-Zip:

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: MELISSA MCCORKLE PDT 04/07/2009