

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93105

Entity Name: BARRIER REEF, INC.

FILED  
May 06, 2008  
Secretary of State

**Current Principal Place of Business:**

1921 NW BOCA RATON BLVD  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

4760 NW 2ND TERR  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 59-2621492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORRIS, KENT  
4760 NW 2ND TER.  
BOCA RATON, FL 33431 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: NORRIS, KENT,  
Address: 4760 NW 2 TERR  
City-St-Zip: BOCA RATON, FL

Title: DS ( ) Delete  
Name: NORRIS, SHARON REILL, Y  
Address: 4760 NW 2ND TERR.  
City-St-Zip: BOCA RATON, FL

Title: DT ( ) Delete  
Name: NORRIS, KENT JR.,  
Address: 172 PINEHURST POINT DR.  
City-St-Zip: ST. AUGUSTINE, FL 32092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SHARON R. NORRIS

DS

05/06/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date