

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J08207

FILED
Mar 05, 2008
Secretary of State

Entity Name: CRABBY BILL'S SEAFOOD, INC.

Current Principal Place of Business:

475 CENTRAL AVENUE
SUITE 202
ST. PETERSBURG, FL 33701

New Principal Place of Business:

C/O ERNEST L. MASCARA
721 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33701

Current Mailing Address:

C/O ERNEST L MASCARA, PA
475 CENTRAL AVENUE, SUITE 202
ST. PETERSBURG, FL 33731

New Mailing Address:

C/O ERNEST L MASCARA
PO BOX 266
ST. PETERSBURG, FL 33731 US

FEI Number: 59-2734971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
THE KRESS BUILDING, SUITE 202
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

MASCARA, ERNEST L
721 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33701 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: ERNEST L. MASCARA

03/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LODER, GEORGE W JR
Address: 5030 OAKLAWN LANE
City-St-Zip: MADEIRA BCH, FL 33708 US

Title: DS () Delete
Name: JENKINS, ELEANOR S
Address: 5040 OAKLAWN LANE
City-St-Zip: MADEIRA BCH, FL 33708 US

Title: DVT () Delete
Name: LODER, MATTHEW
Address: 401 GULF BOULEVARD
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Title: DT () Delete
Name: WHITE, DOLORES A
Address: 5033 OAKLAWN LANE
City-St-Zip: MADEIRA BCH, FL 33708 US

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:

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: MATTHEW LODER

DVT

03/05/2008

Electronic Signature of Signing Officer or Director

Date