2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J89228

1. Entity Name

SALTY DOG SURF & SPORTS CENTER #2, INC.



Principal Place of Business

% BRUCE D. MILLER 100 SOUTH ATLANTIC AVE. DAYTONA BEACH, FL 32118-4302 Mailing Address

% BRUCE D. MILLER 100 SOUTH ATLANTIC AVE. DAYTONA BEACH, FL 32118-4302 US

FILED Mar 09, 2007 08:00 AM Secretary of State

Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MILLER, BRUCE D. 100 SOUTH ATLANTIC AVE. DAYTONA BEACH, FL DO NOT WRITE
IN THIS SPACE

| 8. The above the obligat | named entity submits this statement for the plans of registered agent. | purpose of changing its register | office or a | egistered agent, or bo | th, in the State of Florida. I am familiar o | with, and accept |
|---|--|---|-------------|---|--|------------------|
| SIGNATURE | | | | Agent signature required when reinstating) DATE | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | U00000661601 03/20/07-80048-009 | 150.00 | |
| 10. | OFFICERS AND DIREC | CTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MILLER, BRUCE D. 4832 S PENINSULA DR PONCE INLET, FL | | | | | , |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MILLER, SHARON N. 4832 S PENINSULA DR PONCE INLET, FL | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ~ ~~ | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 18 | - | · · · · · · · · · · · · · · · · · · · | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like gmpowered.

SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7·7·7 (320)·2+3·72

Date Daytime Phone 4