

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K17298

FILED
Feb 07, 2009
Secretary of State

Entity Name: BLUE WAVE INVESTMENTS INC.

Current Principal Place of Business:

% CLAUDE D. WILKERSON
706 SO BROAD ST
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

% CLAUDE D. WILKERSON
706 SO BROAD ST
BROOKSVILLE, FL 34601

New Mailing Address:

% CLAUDE D. WILKERSON
6043 VALLEY SPRING DRIVE
BROOKSVILLE, FL 34601

FEI Number: 59-2879113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKERSON, CLAUDE D
706 S. BROAD ST
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

WILKERSON, CLAUDE D PRES.
6043 VALLEY SPRING DRIVE
BROOKSVILLE, FL 34601 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: CLAUDE DOUGLAS WILKERSON

02/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: WILKERSON, CLAUDE DOU, GLAS
Address: 6043 VALLEY SPRING DR
City-St-Zip: BROOKSVILLE, FL

Title: S (X) Delete
Name: WILKERSON, BRUCE D.,
Address: 58 JAMAICA STREET
City-St-Zip: HOMOSASSA, FL 34446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILKERSON, CLAUDE D P
Address: 6043 VALLEY SPRING DR
City-St-Zip: BROOKSVILLE, FL 34601

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: CLAUDE DOUGLAS WILKERSON

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date