

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66309

Entity Name: BOATWRENCH, INC.

FILED
Mar 18, 2009
Secretary of State

Current Principal Place of Business:

C/O ROBERT GINA
290 N ANCHOR RD UNIT 112
CASSELBERRY, FL 327073267

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT GINA
290 N ANCHOR RD UNIT 112
CASSELBERRY, FL 327073267

New Mailing Address:

FEI Number: 59-2957496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GINA, ROBERT
290 N ANCHOR RD UNIT 112
CASSELBERRY, FL 327073267 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: PVS () Delete
Name: GINA, ROBERT
Address: 290 ANCHOR ROAD
City-St-Zip: CASSELBERRY, FL

Title: TD () Delete
Name: GINA, ROBERT
Address: 290 ANCHOR RD
City-St-Zip: CASSELBERRY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT GINA

PVS

03/18/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date