## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K83393

Entity Name: MARITIME VENTURE I, INC.

FILED Jan 03, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 385 ANGLER DRIVE GOODLAND, FL 34140 US **Current Mailing Address: New Mailing Address:** PO BOX 156 GOODLAND, FL 34140 US FEI Number: 65-0120263 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DANE, KRIS A 1300 DOLPHIN RD NAPLES, FL 34102 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DANE, KRIS A Name: Name: 1300 DOLPHIN RD Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: VPD Title: () Delete () Change () Addition COMBS, DENNIS Name: Name: 1500 AIRPORT RD S Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: ( ) Delete Title: Title: SD () Change () Addition STEPHEN, MICHAEL Name: Name: 374 GOLE DR S Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: ( ) Delete Title: () Change () Addition WESTON, DAVID Name: Name: Address: 4748 1ST AVE SW Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: Title: ( ) Delete () Change () Addition DANE, DOUGLAS Name: Name: 6284 THOMASVILLE ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: ELLIS, KELLY Name: 1302 5TH AVE SO Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the 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: KRIS A DANE PD 01/03/2007