## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83393

Entity Name: MARITIME VENTURE I, INC.

FILED Feb 23, 2009 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 (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANE, KRIS A JANE YAEGER CHEFFY ESQUIRE 1050 BORGHESE LANE 2375 TAMIAMI TRAIL NORTH **APT 703** SUITE 310

NAPLES, FL 34114 US NAPLES, FL 34103 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: JANE CHEFFY 02/23/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

DANE, KRIS A Name: Name: BARKSDALE, ANDREW

1050 BORGHESE LANE, APT 703 2748 TIBURON BLVD EAST, APT C-202 Address: Address:

City-St-Zip: NAPLES, FL 34114 City-St-Zip: NAPLES, FL 34109

VPD Title: Title: () Delete () Change () Addition

COMBS, DENNIS Name: Name: 1500 AIRPORT RD S Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip:

Title: Title: SD () Delete () Change () Addition

STEPHEN, MICHAEL Name: Name: 374 GOLF DR S Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip:

Title: DT () Delete Title: DT (X) Change ( ) Addition ELLIS, KELLY TIM, CABRAL Name: Name:

Address: 1302 5TH AVE SO Address: 1084 SIXTH AVENUE NORTH

City-St-Zip: City-St-Zip: NAPLES, FL 34102 NAPLES, FL 34102

Title: (X) Delete Title: () Change () Addition

BARKSDALE, ANDREW Name: Name: 2748 TIBURON BLVD, EAST Address: Address: City-St-Zip: NAPLES, FL 34109 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: ANDREW BARKSDALE PD 02/23/2009