

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00128

Entity Name: CREWS MARINE, INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

6985 HWY, 19 SOUTH
PERRY, FL 32348 US

New Principal Place of Business:

Current Mailing Address:

6985 HWY, 19 SOUTH
CREW MARINE
PERRY, FL 32348 US

New Mailing Address:

FEI Number: 59-2958412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREWS, ROY
2306 GOLF COURSE RD.
PERRY, FL 32348 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: PD () Delete
Name: CREWS, ROY
Address: 2306 GOLF COURSE RD
City-St-Zip: PERRY, FL 32348

Title: VST () Delete
Name: CREWS, VERA
Address: 2306 GOLF COURSE RD
City-St-Zip: PERRY, FL 32348

Title: D () Delete
Name: CREWS, VERA
Address: 2306 GOLF COURSE RD.
City-St-Zip: PERRY, FL 32348

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VERA CREWS

VP

04/10/2009

Electronic Signature of Signing Officer or Director

Date