

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L58942

Entity Name: RF MARINE, INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

C/O MATTHEW E. MORRALL
2455 E SUNRISE BLVD PHW
FORT LAUDERDALE, FL 33304 US

Current Mailing Address:

C/O MATTHEW E. MORRALL
2455 E. SUNRISE BLVD.
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

C/O MATTHEW E. MORRALL
2850 NORTH ANDREWS AVE
FORT LAUDERDALE, FL 33311 US

New Mailing Address:

RICHARD FOSTER
2430 EAST RAINTREE DRIVE
NEW CASTLE, IN 47362 US

FEI Number: 58-1897365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRALL, MATTHEW E.
2455 E. SUNRISE BLVD.
PENTHOUSE WEST
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

MORRALL, MATTHEW E.
2850 NORTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33311 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

04/15/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FOSTER, RICHARD M.D.,
Address: 1007 N. 16TH STREET
City-St-Zip: NEWCASTLE, IN 47362

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FOSTER, RICHARD M.D.,
Address: 1007 N. 16TH STREET
City-St-Zip: NEW CASTLE, IN 47362

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD FOSTER MD

D

04/15/2005

Electronic Signature of Signing Officer or Director

Date