2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N03000003183

Entity Name: SOUTHERN CRUISERS OF FLORIDA, INC.

Current Principal Place of Business:

11204 GLOVER RD
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

11204 GLOVER RD
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 52-2421440 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREER, DONALD M
11204 GLOVER RD
PORT RICHEY, FL 34668 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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	GREER, DONALD M	
Address:	11204 GLOVER RD	
City-St-Zip:	PORT RICHEY, FL 34668	
Title:	VD	( ) Delete
Name:	PRANGER, BILL	
Address:	5830 DEASE ROAD	
City-St-Zip:	SAINT CLOUD, FL 34771	
Title:	SD	( ) Delete
Name:	GRIMES, JIM	
Address:	3738 GREENBRIAR AVE	
City-St-Zip:	BUNNELL, FL 32110	
Title:	TD	( ) Delete
Name:	RADCLIFF, HARVEY	
Address:	714 N 59TH AVE	
City-St-Zip:	PENSACOLA, FL 32506	

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:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD M. GREER PD 04/08/2009

Electronic Signature of Signing Officer or Director — Date