2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2011
Secretary of State

DOCUMENT# N03000003218

Entity Name: IN HIS WAKES, INC.

Current Principal Place of Business:

275 LAWERENCE ST.
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

205 SW MAGNOLIA AVENUE
KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

PO BOX 968
KEYSTONE HEIGHTS, FL 32656

New Mailing Address:

FEI Number: 06-1693902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, KRISTI
213 SE 28TH WAY
KEYSTONE HEIGHTS, FL 32656 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: PRES
Name: JOHNSON, KRISTI
Address: 213 SE 28TH WAY
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: SEC
Name: HARP, JULLIE R
Address: 6313 PAYNE ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: MEM
Name: NATE, MILLER
Address: 61510 TALL TREE CT.
City-St-Zip: BEND, OR 97702 32

Title: MEM
Name: ROB, MORFORD
Address: 810 STATE ROAD 26
City-St-Zip: MELROSE, FL 32666

I hereby 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 all other like empowered.

SIGNATURE: J. RENEE' HARP SEC 02/22/2011

Electronic Signature of Signing Officer or Director — Date