2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005032

Entity Name: OFFSHORE POWER BOAT ASSOCIATION, CORP.

FILED Apr 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2394 GUN FLINT TRAIL 716 PRUIT

PALM HARBOR, FL 34683 MIDARA BEACH, FL 33708

Current Mailing Address: New Mailing Address:

2394 GUN FLINT TRAIL 716 PRUITT

PALM HARBOR, FL 34683 MIDARA BEACH, FL 33708

FEI Number: 34-1986138 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ERTURK, MICHAEL WALKER, KATHE 2394 GUN FLINT TRAIL 716 PRUITT

PALM HARBOR, FL 34683 US MIDARA BEACH, FL 33708 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: KATHE WALKER 04/15/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: D () Delete Title: PRES (X) Change () Addition

 Name:
 ROSS, ELLIOT M
 Name:
 WALKER, KATHE

 Address:
 2836 SKIMMER PT RD
 Address:
 716 PRUITT

City-St-Zip: GULFPORT, FL 34624 City-St-Zip: MADEIRA BEACH, FL 33708

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

 Name:
 PILINI, JAY
 Name:
 RYERSON, SCOTT

 Address:
 127 11TH ST E
 Address:
 5504 VINCI CIRCLE

 City-St-Zip:
 TIERRA VERDE, FL 33715
 City-St-Zip:
 SARASOTA, FL 34243

 $\label{eq:title:definition} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{TREA} \qquad \mbox{(X) Change () Addition}$

 Name:
 HANKE, RAY
 Name:
 HOPSON, SUSAN

 Address:
 10871 49TH ST N
 Address:
 7958 9TH AVE S

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: ST. PETERSBURG, FL 33707

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

 Name:
 Name:
 MARSH, LYNDA

 Address:
 Address:
 240 EAST MAEIRA AVE

 City-St-Zip:
 City-St-Zip:
 MADEIRA BEACH, FL 33708

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

SIGNATURE: KATHE WALKER PRES 04/15/2004