2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N03000006986

Entity Name: FLORIDA LURE ANGLERS, INC.

Current Principal Place of Business:

4656-3 COLLINS ROAD
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

4656-3 COLLINS ROAD
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 81-0629547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, ROBERT V
536 BOWLES ST
NEPTUNE BEACH, FL 32266 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:	P	( ) Delete
Name:	DEHLINGER, CHARLES	
Address:	4656 COLLINS ROAD	
City-St-Zip:	ORANGE PARK, FL 32073	
Title:	V	( ) Delete
Name:	NOBLES, J.D.	
Address:	1015 ATLANTIC BLVD SUITE 197	
City-St-Zip:	ATLANTIC BEACH, FL 32233	
Title:	D	( ) Delete
Name:	WATERS, SUMMER	
Address:	1015 ATLANTIC BLVD SUITE 197	
City-St-Zip:	ATLANTIC BEACH, FL 32233	
Title:	T	( ) Delete
Name:	BITTNER, CHARLES	
Address:	286 DEVONSHIRE LN	
City-St-Zip:	ORANGE PARK, FL 32073	
Title:	S	( ) Delete
Name:	HAYES, MICHAEL	
Address:	1015 ATLANTIC BLVD SUITE 197	
City-St-Zip:	ATLANTIC BEACH, FL 32233	
Title:	D	( ) Delete
Name:	NOBLES, J.D.	
Address:	700 VALLEY FORGE RD	
City-St-Zip:	JACKSONBILLE, FL 32208	

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:	
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: CHARLES DEHLINGER PRES 04/14/2009

Electronic Signature of Signing Officer or Director — Date