

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008144

FILED
Jun 28, 2005
Secretary of State

Entity Name: PROTECT OUR WATERWAYS, ESTUARIES, AND RIGHTS, INC.

Current Principal Place of Business:

1001 3RD AVE. W., SUITE 500
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

1001 3RD AVE. W., SUITE 500
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 27-0068930 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BARNES, GARRET T
3119 MANATEE AVE. WEST
BRADENTON, FL 34205 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

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BARNES, GARRET T
Address: 3119 MANATEE AVE. WEST
City-St-Zip: BRADENTON, FL 34205

Title: VP () Delete
Name: LAURIE, JOHN
Address: 1111 8TH AVE. WEST
City-St-Zip: BRADENTON, FL 34205

Title: P () Delete
Name: SHINN, BYRON
Address: 1001 3RD AVE. WEST, SUITE 500
City-St-Zip: BRADENTON, FL 34205

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:

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: BYRON E. SHINN

P

06/28/2005

Electronic Signature of Signing Officer or Director

Date