2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2005
Secretary of State

DOCUMENT# N03173

Entity Name: HOLIDAY ISLES MARINE TRAINING & RESCUE GROUP, INC.

Current Principal Place of Business:

299 BOCA CIEGA DR
MADEIRA BCH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

299 BOCA CIEGA DR
MADEIRA BCH, FL 33708 US

New Mailing Address:

FEI Number: 59-2834825 **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:

GARDNER, DAVID W
8477 MERRIMOOR BLVD
LARGO, FL 33777 US

Name and Address of New Registered Agent:

HOFFMAN, MICHELLE L
13864 BERMUDA DRIVE
SEMINOLE, FL 33776 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: MICHELLE L. HOFFMAN 06/05/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GARDNER, DAVID W
Address: 8477 MERRIMOOR BLVD
City-St-Zip: LARGO, FL 33777

Title: VD ( ) Delete
Name: AFFELD, TERRENCE
Address: 1608 CORDOVA GREENS
City-St-Zip: SEMINOLE, FL 33777

Title: TS ( ) Delete
Name: GARDNER, NANCY L
Address: 8477 MERRIMOOR BLVD
City-St-Zip: SEMINOLE, FL 33777

Title: D (X) Delete
Name: KENNEDY, DENA L
Address: 10928 62ND AVE N
City-St-Zip: SEMINOLE, FL 33772

Title: D (X) Delete
Name: BUSHEY, RICHARD L
Address: 7963 SAILBOAT KEY BLVD
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: D ( ) Delete
Name: BROWN, MICHAEL A
Address: 15843 REDINGTON DR
City-St-Zip: REDINGTON BEACH, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HOFFMAN, MICHELLE L
Address: 13864 BERMUDA DRIVE
City-St-Zip: SEMINOLE, FL 33776

Title: S (X) Change ( ) Addition
Name: AFFELD, TERRENCE
Address: 1608 CORDOVA GREENS
City-St-Zip: SEMINOLE, FL 33777

Title: V (X) Change ( ) Addition
Name: DEININGER, RICHARD
Address: 1677 WHISPERING DR., WEST
City-St-Zip: LARGO, FL 33771

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: MICHELLE L. HOFFMAN P 06/05/2005
Electronic Signature of Signing Officer or Director Date