

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90177 013 ****61.25

DOCUMENT # N04000007690

1. Entity Name
ANCLOTE KEY ANGLERS, INC.



Principal Place of Business
**298 LAKEVIEW DRIVE
TARPON SPRINGS, FL 34689**

Mailing Address
**298 LAKEVIEW DRIVE
TARPON SPRINGS, FL 34689**

9000000000

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
331 COUNTRY CLUB DRIVE

Suite, Apt. #, etc.

331 COUNTRY CLUB DR.

Suite, Apt. #, etc.

City & State

OLDSMAR FL

City & State

OLDSMAR FL

Zip

34677

Country

US

Zip

34677

Country

US

03142007

Chg-NP

CR2E037 (12/06)

4. FEI Number
80-0118633

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MALAMATOS, STELIOS J
298 LAKEVIEW DRIVE
TARPON SPRINGS, FL 34689**

7. Name and Address of New Registered Agent

Name **CHARLES D PITTMAN III**
Street Address (P.O. Box Number is Not Acceptable)
331 COUNTRY CLUB DRIVE
City **OLDSMAR** FL Zip Code **34677**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Charles D Pittman III

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **MALAMATOS, STELIOS J**
STREET ADDRESS **298 LAKEVIEW DRIVE**
CITY-ST-ZIP **TARPON SPRINGS, FL 34689**

TITLE **VP** ☒ Delete
NAME **RIEUMONT, DAVID**
STREET ADDRESS **3186-C CHARTER CLUB DR.**
CITY-ST-ZIP **TARPON SPRINGS, FL 34688**

TITLE **S/T** ☒ Delete
NAME **MALAMATOS, MARY B**
STREET ADDRESS **298 LAKEVIEW DRIVE**
CITY-ST-ZIP **TARPON SPRINGS, FL 34689**

TITLE **VC** ☐ Delete
NAME **CLARK, ALFRED W**
STREET ADDRESS **1075 SANDRA DR.**
CITY-ST-ZIP **PALM HARBOR, FL 34683**

TITLE **CEO** ☐ Delete
NAME **PITTMAN, CHARLES D**
STREET ADDRESS **331 COUNTRY CLUB DR.**
CITY-ST-ZIP **OLDSMAR, FL 34677**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **RIEUMONT, DAVID**
STREET ADDRESS **3186-C CHARTER CLUB DR.**
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE **VP - D** ☐ Change ☒ Addition
NAME **MAHINIS, TOMMY**
STREET ADDRESS **629 PESSIER DRIVE**
CITY-ST-ZIP **TARPON SPRINGS FL 34689**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VC** ☒ Change ☐ Addition
NAME **CLARK, ALFRED**
STREET ADDRESS **1075 SANDRA DR**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **CEO - D** ☒ Change ☐ Addition
NAME **PITTMAN III, CHARLES D.**
STREET ADDRESS **331 COUNTRY CLUB DRIVE**
CITY-ST-ZIP **OLDSMAR FL 34677**

TITLE **VC** ☐ Change ☒ Addition
NAME **ORLANDO, JERRY**
STREET ADDRESS **1779 E. GROVELEAF AVE.**
CITY-ST-ZIP **PALM HARBOR FL 34683**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charles D Pittman III* **CEO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-07
Date

813-855-6437
Daytime Phone #