

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003919

Entity Name: AMELIA CRUIZERS, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

2658 AMELIA ROAD
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15714
FERNANDINA BEACH, FL 32035

New Mailing Address:

FEI Number: 20-2607982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMULLEN, BRUCE
2658 AMELIA ROAD
FERNANDINA BEACH, FL 32034 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: MARLOW, GARY
Address: 3744 CAYMAN CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: V () Delete
Name: BLACK, BARRY
Address: 2156 SAPELO COURT
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S () Delete
Name: MCMULLEN, BRUCE
Address: 2658 AMELIA ROAD
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T () Delete
Name: SWAN, ROBERT
Address: 2044 VILLIAGE LANE
City-St-Zip: FERNANDINA BEACH, FL 32034

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:

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: ROBERT SWAN

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date