

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004099

FILED
Feb 15, 2010
Secretary of State

Entity Name: MOSQUITO LAGOON PADDLERS, INC.

Current Principal Place of Business:

57 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164

New Principal Place of Business:

6223 YOSEMITE DR.
PORT ORANGE, FL 32127

Current Mailing Address:

57 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164

New Mailing Address:

6223 YOSEMITE DR.
PORT ORANGE, FL 32127

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENZIE, ANNE C
57 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

DEWKETT, ELLEN
6223 YOSEMITE DR.
PORT ORANGE, FL 32127 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: ELLEN DEWKETT

02/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ARNOLD, ANN
Address: 1709 QUEEN PALM
City-St-Zip: EDGEWATER, FL 32132

Title: VPD
Name: LOVINSKY, RIC
Address: P. O. BOX 2147
City-St-Zip: SOUTH DAYTONA, FL 32121

Title: SD
Name: SULLIVAN, MARILYN
Address: 115 9TH STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TD
Name: DEWKETT, ELLEN
Address: 6223 YOSEMITE DR.
City-St-Zip: PORT ORANGE, FL 32127

Title: VPD
Name: BURKET, JON
Address: 164 QUAIL CT.
City-St-Zip: PORT ORANGE, FL 32127

I hereby 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 all other like empowered.

SIGNATURE: ELLEN DEWKETT

TD

02/15/2010

Electronic Signature of Signing Officer or Director

Date