


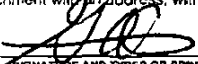
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Ward & Company

FILED
May 28, 2008 8:00 am
Secretary of State

05-28-2008 90016 046 ****61.25

**2008 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # N06000001119					
1. Entity Name RIVIERA BEACH MARITIME ACADEMY, CORP.					
Principal Place of Business 251 W. 11TH STREET RIVIERA BEACH, FL 33404-7534 US			Mailing Address 251 W. 11TH STREET RIVIERA BEACH, FL 33404-7534		
2. Principal Place of Business - No P.O. Box # 251 West 11th Street			3. Mailing Address Same		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Riviera Beach, FL			City & State		
Zip 33404		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent CARTER, GEORGE A 3641 PALM DRIVE RIVIERA BEACH, FL 33404-2415				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	MGRM <input checked="" type="checkbox"/> Delete				
NAME	JS FAMILY HOLDINGS, INC.				
STREET ADDRESS	1550 AVENUE C				
CITY-ST-ZIP	RIVIERA BEACH, FL 33404				
TITLE	Tim Oenbrink, Director <input checked="" type="checkbox"/> Delete				
NAME	369 Kelsey Park Circle				
STREET ADDRESS	Palm Beach Gardens, FL 33410				
CITY-ST-ZIP					
TITLE	Director <input checked="" type="checkbox"/> Delete				
NAME	Paula Ross				
STREET ADDRESS	3115 Park Avenue				
CITY-ST-ZIP	Singer Island, FL 33404				
TITLE	Director <input checked="" type="checkbox"/> Delete				
NAME	Richard Weiler				
STREET ADDRESS	2263 SW Murphy Rd.				
CITY-ST-ZIP	Palm City, FL 32990				
TITLE	Don Wilson, Director <input checked="" type="checkbox"/> Delete				
NAME	1416 West 27th Street				
STREET ADDRESS	Riviera Beach, FL 33404				
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	COLES WILKINSON				
STREET ADDRESS	600 Dixie Hwy Unit 211				
CITY-ST-ZIP	West Palm Beach, FL 33401				
TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	MICHAEL SAMUELS				
STREET ADDRESS	16514 75th Way North				
CITY-ST-ZIP	Palm Beach Gardens, FL 33418				
TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	BRUCE MORGAN				
STREET ADDRESS	4220 Broadway				
CITY-ST-ZIP	West Palm Beach, 33407				
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
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 517, 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:  (561) 4/28/08 841-7600					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					