

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012201

FILED  
Feb 04, 2010  
Secretary of State

Entity Name: FLORIDA SURFCASTERS INC

## Current Principal Place of Business:

2684 SENECA DR.  
ST. JOHNS, FL 32259

## New Principal Place of Business:

4841 WALLINGFORD PL. W.  
JACKSONVILLE, FL 32257

## Current Mailing Address:

2684 SENECA DR.  
ST. JOHNS, FL 32259

## New Mailing Address:

4841 WALLINGFORD PL. W.  
JACKSONVILLE, FL 32257

FEI Number: 43-2115059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOPFER, E. W  
2684 SENECA DR.  
ST. JOHNS, FL 32259 US

## Name and Address of New Registered Agent:

CLARK, S W  
4841 WALLINGFORD PL. W.  
JACKSONVILLE, FL 32257 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: SUELLEN W. CLARK

02/04/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: KUHN, NOEL  
Address: 8565 ECHORIDGE CT.  
City-St-Zip: JACKSONVILLE, FL 32244

Title: V  
Name: RAFTER, CHARLES J  
Address: 14 FLETCHER CT.  
City-St-Zip: PALM COAST, FL 32137

Title: S  
Name: ALLISON, TODD  
Address: 2001 HODGES BLVD. APT 1015  
City-St-Zip: JACKSONVILLE, FL 32224

Title: T  
Name: CLARK, SUELLEN W  
Address: 4841 WALLINGFORD PL. W.  
City-St-Zip: JACKSONVILLE, FL 32257

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: CHARLES J. RAFTER

V

02/04/2010

Electronic Signature of Signing Officer or Director

Date