

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001735

FILED
Apr 05, 2009
Secretary of State

Entity Name: CALUSA FLY FISHERS, INC.

Current Principal Place of Business:

C/O 3417 SW 2ND AVE
CAPE CORAL, FL 33914 US

New Principal Place of Business:

Current Mailing Address:

C/O 3417 SW 2ND AVE
CAPE CORAL, FL 33914 US

New Mailing Address:

FEI Number: 20-8111353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KESSINGER, STEPHEN M
C/O 3417 SW 2ND AVE
CAPE CORAL, FL 33914 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: DIR () Delete
Name: WEST, MICHAEL E
Address: 134 SE 10TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: SEC () Delete
Name: REHR, JOYCE
Address: 1155 BUTTONWOOD LN
City-St-Zip: SANIBEL, FL 33957 US

Title: DIR () Delete
Name: REHR, MICHAEL
Address: 1155 BUTTONWOOD LN
City-St-Zip: SANIBEL, FL 33957 US

Title: TREA () Delete
Name: KESSINGER, STEPHEN M
Address: 3417 SW 2ND AVE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: PRES () Change (X) Addition
Name: STRAUBE, BJORN
Address: 37841 OLD FARM ROAD
City-St-Zip: NORTH FORT MYERS, FL 33917

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: STEPHEN M. KESSINGER

TREA

04/05/2009

Electronic Signature of Signing Officer or Director

_____ Date