2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007734

FILED Jul 29, 2008 Secretary of State

Entity Name: EXCALIBUR SAILING ADVENTURES, INC.

Current Principal Place of Business: New Principal Place of Business:

73800 OVERSEAS HWY ISLAMORADA, FL 33036

Current Mailing Address: New Mailing Address:

P.O. BOX 1405

ISLAMORADA, FL 33036

FEI Number: 26-0672392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORING, CRAIG

17 POINCIANA DRIVE

KEY LARGO, FL 33036 US

DORING, CRAIG

17 POINCIANA DRIVE

KEY LARGO, FL 33036 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: CRAIG DORING 07/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: CEO () Delete Title: CEO (X) Change () Addition

 Name:
 DORING, CRAIG
 Name:
 DORING, CRAIG B

 Address:
 17 POINCIANA DRIVE
 Address:
 17 POINCIANA DRIVE

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: D () Delete Title: () Change () Addition

 Name:
 DRAKE, MELISSA
 Name:

 Address:
 302 N. 6TH STREET
 Address:

 City-St-Zip:
 MURRAY, KY 42071
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LAWRENCE, STEPHEN
 Name:

 Address:
 520 SW 7TH STREET
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33315
 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: CRAIG DORING CEO 07/29/2008