

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000335

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: INSHORE SALTWATER ANGLERS, INC.

## Current Principal Place of Business:

2910 SR 13 N.  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

4826 ELIZABETH TERRACE  
JACKSONVILLE, FL 32205

## Current Mailing Address:

P.O. BOX 550708  
JACKSONVILLE, FL 32255

## New Mailing Address:

FEI Number: 11-3838549

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PERSAMPIERI, STEVE  
2910 SR 13 N.  
JACKSONVILLE, FL 32259 US

## Name and Address of New Registered Agent:

POPE, RANDY  
4826 ELIZABETH TERRACE  
JACKSONVILLE, FL 32205 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: RANDY POPE

01/19/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PERSAMPIERI, STEVE  
Address: 2910 SR 13 N.  
City-St-Zip: JACKSONVILLE, FL 32259

Title: V ( ) Delete  
Name: CREWS, BEN  
Address: 10671 FORD RD.  
City-St-Zip: BRYCEVILLE, FL 32009

Title: T ( ) Delete  
Name: ANSON, KELLI  
Address: 14082 FISH EAGLE DR. E.  
City-St-Zip: JACKSONVILLE, FL 32226

Title: S (X) Delete  
Name: TAYLOR, BJ  
Address: 11348 ELAINE DR.  
City-St-Zip: JACKSONVILLE, FL 32218

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: POPE, RANDY  
Address: 4826 ELIZABETH TERRACE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: V (X) Change ( ) Addition  
Name: PRICE, JIM  
Address: 1158 INEZ DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: T (X) Change ( ) Addition  
Name: ANSON, KELLI  
Address: 14082 FISH EAGLE DR. E.  
City-St-Zip: JACKSONVILLE, FL 32226

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: KELLI ANSON

T

01/19/2009

Electronic Signature of Signing Officer or Director

Date