2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2011
Secretary of State

DOCUMENT# N10000004374

Entity Name: FAVE BOATING EXPEDITIONS, INC.

Current Principal Place of Business:

204 NORTH ST. THOMAS CIRCLE
APOLLO BEACH, FL 33572

New Principal Place of Business:

Current Mailing Address:

204 NORTH ST. THOMAS CIRCLE
APOLLO BEACH, FL 33572

New Mailing Address:

FEI Number: 27-2467612 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOWALL, KELLY
204 NORTH ST. THOMAS CIRCLE
APOLLO BEACH, FL 33572 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: P
Name: KOWALL, KELLY
Address: 204 NORTH ST. THOMAS CIRCLE
City-St-Zip: APOLLO BEACH, FL 33572

Title: VPD
Name: SANTIAGO, ROLANDO
Address: P.O. BOX 3547
City-St-Zip: APOLLO BEACH, FL 33572

Title: STD
Name: HASLER, E ANNE
Address: P.O. BOX 3547
City-St-Zip: APOLLO BEACH, FL 33572

Title: D
Name: DURR, KAREN
Address: P.O. BOX 3547
City-St-Zip: APOLLO BEACH, FL 33572

Title: D
Name: WYCKOFF, BRAD
Address: P.O. BOX 3547
City-St-Zip: APOLLO BEACH, FL 33572

Title: D
Name: OTT, CHRIS
Address: P.O. BOX 3547
City-St-Zip: APOLLO BEACH, FL 33572

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: KELLY KOWALL P 04/19/2011

Electronic Signature of Signing Officer or Director — Date