

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11999

FILED
Jan 16, 2007
Secretary of State

Entity Name: CENTRAL FLORIDA OFFSHORE ANGLERS, INC.

Current Principal Place of Business:

3118 HEARTLEAF PLACE
WINTER PARK, FL 32792 US

New Principal Place of Business:

2220 EDGAR COURT
OVIEDO, FL 32765 US

Current Mailing Address:

P.O. BOX 607459
ORLANDO, FL 328607459 US

New Mailing Address:

FEI Number: 59-2499515 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KALBFLEISCH, KEITH
3118 HEARTLEAF PLACE
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

DAVID R. HEIL, P.A.
2324 LEE ROAD
WINTER PARK, FL 32789 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: DAVID R. HEIL

01/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KALBFLEISCH, KEITH
Address: 3118 HEARTLEAF PLACE
City-St-Zip: WINTER PARK, FL 32792

Title: VD () Delete
Name: TALAMAS, RENE'
Address: 2887 WILLOW BAY TER.
City-St-Zip: CASSELBERRY, FL 32707

Title: TD () Delete
Name: PAGE, JEFF
Address: 11220 CREDO CT
City-St-Zip: ORLANDO, FL 32837

Title: SD () Delete
Name: TALAMAS, LISA
Address: 2887 WILLOW BAY TERRACE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EISMANN, WALTER
Address: 2220 EDGAR COURT
City-St-Zip: WINTER PARK, FL 32765

Title: VD (X) Change () Addition
Name: WINN, TERRY
Address: P.O. BOX 190
City-St-Zip: OSTEEN, FL 32764

Title: TD (X) Change () Addition
Name: MAGRADY, PATRICK
Address: 845 COACHLAMP COURT
City-St-Zip: SANFORD, FL 32771

Title: SD (X) Change () Addition
Name: HEIL, DAVID
Address: 1653 JOELINE COURT
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID HEIL

SD

01/16/2007

Electronic Signature of Signing Officer or Director

Date