2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11999

FILED Jan 19, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA OFFSHORE ANGLERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 2220 EDGAR COURT 845 COACH LAMP CT OVIEDO, FL 32765 SANFORD, FL 32771 US **Current Mailing Address: New Mailing Address:** P.O. BOX 607459 ORLANDO, FL 328607459 US FEI Number: 59-2499515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVID R. HEIL, P.A. MAGRADY, PATRICK J 845 COACH LAMP CT 2324 LEE ROAD WINTER PARK, FL 32789 SANFORD, FL 32771 US 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: PATRICK J MAGRADY 01/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete EISMANN, WALTER Name: Name: 2220 EDGAR COURT Address: Address: City-St-Zip: WINTER PARK, FL 32765 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: WINN, TERRY Name: Address: P.O. BOX 190 Address: City-St-Zip: OSTEEN, FL 32764 City-St-Zip: Title: () Delete Title: () Change () Addition MAGRADY, PATRICK Name: Name: 845 COACHLAMP COURT Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: () Delete (X) Change () Addition Title: SD Title: SD Name: HEIL, DAVID Name: CARNEY, JOHN 1653 JOELINE COURT 4946 WANSLEY DR Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: ORLANDO, FL 32812

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: PATRICK J MAGRADY TD 01/19/2009