

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27290

FILED
Apr 13, 2004
Secretary of State

Entity Name: SOUTHWEST FLORIDA SHRIMP ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 6189
FT. MYERS BEACH, FL 33932

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6189
FT. MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 65-0245678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, DENNIS
21251 CARTER RD
ESTERO, FL 33928 US

Name and Address of New Registered Agent:

HENDERSON, DENNIS
21251 CARTER RD
ESTERO, FL 33928 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: DENNIS HENDERSON

04/13/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HENDERSON, DENNIS L.,
Address: 1300 MAIN STREET
City-St-Zip: FT. MYERS BEACH, FL

Title: VD () Delete
Name: VILLERS, JOSEPH,
Address: 1300 MAIN STREET
City-St-Zip: FT. MYERS BEACH, FL

Title: SD () Delete
Name: GALA, CHRISTINE,
Address: 1300 MAIN STREET
City-St-Zip: FT. MYERS BEACH, FL

Title: TD () Delete
Name: HENDERSON, RANELL,
Address: 1300 MAIN STREET
City-St-Zip: FT. MYERS BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HENDERSON, DENNIS L.,
Address: POST OFFICE BOX 6189
City-St-Zip: FT. MYERS BEACH, FL 33932

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GALA, CHRISTINE,
Address: 7227 HENDRY CREEK DRIVE
City-St-Zip: FT. MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTINE GALA

S

04/13/2004

Electronic Signature of Signing Officer or Director

Date