2009 **NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 13 AM 9:37

DOCUMENT # N30991

1. Entity Name

KREWE OF WRECKS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	6577 Whispering Woods Dr Suite, Apt. #, etc.
City & State	City & State: Pace FL
Zip / Country	Zip: 32571 / Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3019548 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: WAITE, MELANIE

Street Address (P.O. Box Number is Not Acceptable): 5577 WHISPERING WOODS DR.

City: PACE FL Zip Code: 32571

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Melanie Waite
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

P	Jeff Goudey 3208 Redwood Lane Apt. C Gulf Breeze FL 32563		200140504452 01/13/09--01023--001 **70.00
T	Melanie Waite 6577 Whispering Woods Dr Pace FL 32571		
D	Philip Simoneaux 3107 E. Gonzalez St. Pensacola FL 32503		DO NOT WRITE
D	Sandra Johnston 785 Pensacola Beach Blvd. Pensacola Beach FL 32561		IN THIS SPACE
D	Carleen Wheeler 2525 Whaley Ave. Pensacola, FL 32503		
D	Vern Phillips 1353 Connemara Circle Gulf Breeze FL 32563		

CR2E037B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Melanie Waite MELANIE WAITE 1-5-09 850-292-2099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

KS