

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39729

FILED
Feb 06, 2009
Secretary of State

Entity Name: MONROE COUNTY COMMERCIAL FISHERMEN, INC.

Current Principal Place of Business:

501 24TH ST OCEAN
MARATHON, FL 33050 US

New Principal Place of Business:

3980 OVERSEAS HWY
SUITE 104
MARATHON, FL 33050 US

Current Mailing Address:

P. O. BOX 501404
MARATHON, FL 33050 US

New Mailing Address:

FEI Number: 65-0196267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, BETSY
7987 SHARK DRIVE
MARATHON, FL 33050 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: PD () Delete
Name: NILES, GEORGE
Address: PO BOX 420230
City-St-Zip: SUMMERLAND KEY, FL 33042 US

Title: ST () Delete
Name: DANIELS, BETSY
Address: 7987 SHARK DRIVE
City-St-Zip: MARATHON, FL 33050

Title: VD () Delete
Name: PILLAR, BOBBY
Address: 24863 PARK DR
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: VD () Delete
Name: GALE, MITCHELL
Address: 29467 GERALDINE ST
City-St-Zip: BIG PINE KEY, FL 33043

Title: VD () Delete
Name: PITON, ERNEST
Address: 601 PORTIA CIRCLE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: NILES, WILLIAM
Address: P O BOX 420122
City-St-Zip: SUMMERLAND KEY, FL 33042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LESSARD, KARL
Address: 107 GULFWIND LANE
City-St-Zip: MARATHON, FL 33050 US

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

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

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

Title: D (X) Change () Addition
Name: PITON, ERNEST
Address: 601 PORTIA CIRCLE
City-St-Zip: KEY LARGO, FL 33037

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

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: BETSY DANIELS

ST

02/06/2009

Electronic Signature of Signing Officer or Director

Date