

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000866

FILED
May 04, 2009
Secretary of State

Entity Name: THE LORD'S NAVY, INC.

Current Principal Place of Business:

3300 28TH STREET NORTH
ST PETERSBURG, FL 33713 US

New Principal Place of Business:

400 2ND AVE N.E.
ST PETERSBURG, FL 33701 US

Current Mailing Address:

PO BOX 903
SAINT PETERSBURG, FL 33731

New Mailing Address:

FEI Number: 59-3178083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DOWNES, H C
3300 28TH ST N
SAINT PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

DOWNES, H C
400 2ND AVE N.E.
SAINT PETERSBURG, FL 33701 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:

05/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DOWNES, H COLLINGS
Address: 2800 28TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: V () Delete
Name: DOWNES, DEBORAH
Address: 3300 28TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: ST () Delete
Name: MITCHAM, LUPZ V
Address: 1507 BAYSHORE BLVD
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: MANDESE, VINCE
Address: 137 CHIPPEWA
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: MANDESE, JANICE
Address: 137 CHIPPEWA
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: H COLLINGS DOWNES

PRES

05/04/2009

Electronic Signature of Signing Officer or Director

Date