# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 24, 2009**
**Secretary of State**

DOCUMENT# N95000004966

**Entity Name:** MORNING STAR FISHERMEN, INC.

**Current Principal Place of Business:**

33336 OLD ST. JOE RD
DADE CITY, FL 33525 US

**New Principal Place of Business:**

**Current Mailing Address:**

33336 OLD ST. JOE RD
DADE CITY, FL 33525 US

**New Mailing Address:**

**FEI Number: 59-3365112** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GEISSLER, HANS C
33336 OLD ST. JOE RD
DADE CITY, FL 33525 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: GEISSLER, HANS C
Address: 33336 OLD ST. JOE RD
City-St-Zip: DADE CITY, FL 33525 US

Title: TD ( ) Delete
Name: GEISSLER, SIGRID M
Address: 33336 OLD ST. JOE RD
City-St-Zip: DADE CITY, FL 33525 US

Title: D ( ) Delete
Name: SMYZER, ROGER
Address: 250 SIESTA LANE
City-St-Zip: LARGO, FL 33770

Title: D ( ) Delete
Name: WEST, DAVID
Address: 14121 19TH CT
City-St-Zip: DADE CITY, FL 33525

Title: D ( ) Delete
Name: HARRIGAN, EARL
Address: 3350 COMMERCIAL AVE
City-St-Zip: SPRING HILL, FL 34606

Title: D ( ) Delete
Name: MORE, J.D.
Address: P.O. BOX 174
City-St-Zip: SAN ANTONIO, FL 33576

**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:

Title: D (X) Change ( ) Addition
Name: MATZ, GEORGE
Address: 7343 SAWGRASS POINT DR.
City-St-Zip: PINELLAS PARK, FL 33782

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: HANS GEISSLER D 03/24/2009
Electronic Signature of Signing Officer or Director Date