

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 13, 2005
Secretary of State

DOCUMENT# N96000002340

Entity Name: EAST COAST CRUISERS, INC.

Current Principal Place of Business:PO BOX 3221
NEW SMYRNA BCH, FL 32170**New Principal Place of Business:**PO BOX 3221
NEW SMYRNA BEACH, FL 32170 US**Current Mailing Address:**PO BOX 3221
NEW SMYRNA BCH, FL 32170**New Mailing Address:**PO BOX 3221
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 59-3168653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:TEEHAN, PAT
118 N CORY DR
EDGEWATER, FL 32132 US**Name and Address of New Registered Agent:**NEWTON, JANE A
104 FLAMINGO ROAD
EDGEWATER, FL 32141 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: JANE ANNE NEWTON

07/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DT () Delete
Name: TEEHAN, PAT
Address: 1316 ROYAL PALM DR
City-St-Zip: EDGEWATER, FL 32132Title: DV () Delete
Name: WOODWORTH, BRUCE
Address: 5868 BOGGSFORD
City-St-Zip: PORT ORANGE, FL 32127Title: DS () Delete
Name: KLAMO, CAROL
Address: 1803 LIME TREE DRIVE
City-St-Zip: EDGEWATER, FL 32132Title: DT () Delete
Name: NEWTON, JANEANN
Address: 104 FLAMINGO ROAD
City-St-Zip: EDGEWATER, FL 32141**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: TEEHAN, PAT
Address: 1316 ROYAL PALM DR
City-St-Zip: EDGEWATER, FL 32132Title: V (X) Change () Addition
Name: WOODWORTH, BRUCE
Address: 5868 BOGGSFORD
City-St-Zip: PORT ORANGE, FL 32127Title: S (X) Change () Addition
Name: TEEHAN, ROBIN
Address: 1316 ROYAL PALM DRIVE
City-St-Zip: EDGEWATER, FL 32132Title: T (X) Change () Addition
Name: HARTWELL, MARGARET
Address: 2420 TAYLOR ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32170

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: JANE ANNE NEWTON

RA

07/13/2005

Electronic Signature of Signing Officer or Director

Date