

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 11, 2007
Secretary of State

DOCUMENT# N98000006085

Entity Name: CAPT. BOB LEWIS BILLFISH CHALLENGE, INC.**Current Principal Place of Business:**208 S HIBISCUS
MIAMI BEACH, FL 33139**New Principal Place of Business:**7700 N. KENDALL DRIVE
SUITE 805
MIAMI, FL 331556**Current Mailing Address:**PO BOX 189
ISLAMORADA, FL 33036**New Mailing Address:**P O BOX 560237
MIAMI, FL 33456**FEI Number:** 65-0868468**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAKER, SUZAN
208 S HIBISCUS DR.
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**CRITTENDEN, JACK T
9701 S.W. 72 CT.
MIAMI, FL 33156 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: JACK T. CRITTENDEN

05/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOCKE, MARSHALL
Address: 208 S HIBISCUS
City-St-Zip: MIAMI BEACH, FL 33139

Title: STD () Delete
Name: BAKER, SUZAN
Address: PO BOX 189
City-St-Zip: ISLAMORADA, FL 33036

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POTUNONDA, ERNEST
Address: 7700 N. KENDALL DRIVE SUITE 805
City-St-Zip: MIAMI, FL 33156

Title: PRES (X) Change () Addition
Name: FONSECA, JOSE
Address: 7601 S.W. 140 ST.
City-St-Zip: MIAMI, FL 33158

Title: VP () Change (X) Addition
Name: LEWIS, JUDY
Address: 4973 PONCE DE LEON BLVD
City-St-Zip: CORA GABLES, FL 33146

Title: SEC () Change (X) Addition
Name: SANDS, JANICE R
Address: 11500 S.W. 69 AVE.
City-St-Zip: PINECREST, FL 33156

Title: TRES () Change (X) Addition
Name: CRITTENDEN, JACK T
Address: 9701 S.W. 72 CT.
City-St-Zip: MIAMI, FL 33156

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: JUDY LEWIS

VP

05/11/2007

Electronic Signature of Signing Officer or Director

Date