

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006085

FILED
Apr 08, 2009
Secretary of State

Entity Name: CAPT. BOB LEWIS BILLFISH CHALLENGE, INC.

Current Principal Place of Business:

9701 SW 72 CT.
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

P O BOX 560237
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0868468 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRITTENDEN, JACK T
9701 S.W. 72 CT.
MIAMI, FL 33156 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: D () Delete
Name: PORTUONDO, ERNESTO
Address: P O BOX 560237
City-St-Zip: MIAMI, FL 33157

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: LEWIS, HOLLY
Address: 6610 SW 98 ST.
City-St-Zip: MIAMI, FL 33156

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: JACK CRITTENDEN

TR

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date