

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000007625

Entity Name: ISLAND WAY CHARTERS, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

18395 GULF BLVD., STE. 103
INDIAN SHORES, FL 33785

New Principal Place of Business:

6519 114TH ST N.
SEMINOLE, FL 33772

Current Mailing Address:

18395 GULF BLVD., STE. 103
INDIAN SHORES, FL 33785

New Mailing Address:

6519 114TH ST N
SEMINOLE, FL 33772

FEI Number: 59-3695670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIVAS, FRANK R
18395 GULF BLVD STE 103
INDIAN SHORES, FL 33785 US

Name and Address of New Registered Agent:

SAHR, KRISTOPHER A
6519 114TH ST N
SEMINOLE, FL 33772 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: KRISTOPHER SAHR

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHIVAS, FRANK
Address: 18395 GULF BLVD., STE 103
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: V () Delete
Name: SAHR, KRIS A
Address: 18395 GULF BLVD STE 103
City-St-Zip: INDIAN SHORES, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAHR, KRISTOPHER A
Address: 6519 114TH ST N.
City-St-Zip: SEMINOLE, FL 33772

Title: V (X) Change () Addition
Name: SAHR, KRISTOPHER A
Address: 6519 114TH ST N.
City-St-Zip: SEMINOLE, FL 33772

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTOPHER A SAHR

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date