

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046703

Entity Name: THE SUMMER CATCH, INC

FILED
Mar 14, 2009
Secretary of State

Current Principal Place of Business:

9524 BLIND PASS ROAD
STE 13
ST. PETE BEACH, FL 33706

Current Mailing Address:

9524 BLIND PASS ROAD
STE 13
ST. PETE BEACH, FL 33706

New Principal Place of Business:

9524 BLIND PASS ROAD
STE 13
ST. PETE BEACH, FL 33706 US

New Mailing Address:

FEI Number: 59-3722377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSEN, CLAIRE
9524 BLIND PASS RD
13
ST. PETE BEACH, FL 33706 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HANSEN, CLAIRE A
Address: 9524 BLIND PASS RD STE 13
City-St-Zip: ST. PETE BEACH, FL 33706 US

Title: V () Delete
Name: GLACKIN, TONY W
Address: 6743 BONNIE BAY CIRCLE NORTH
City-St-Zip: PINELLAS PARK, FL 33781 US

Title: S () Delete
Name: HANSEN, JOHN W
Address: 6420 BOUGAINVILLE AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33707 US

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:

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: CLAIRE HANSEN

Electronic Signature of Signing Officer or Director

PRES

03/14/2009

Date