2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005
Secretary of State

DOCUMENT# P01000052730

Entity Name: HARBOR BRANCH SHRIMP, INC.

Current Principal Place of Business:

5600 U.S. HIGHWAY 1 NORTH
FT. PIERCE, FL 34946

New Principal Place of Business:

Current Mailing Address:

5600 U.S. HIGHWAY 1 NORTH
FT. PIERCE, FL 34946

New Mailing Address:

FEI Number: 65-1124206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STEWART, WILLIAM J
3366 OCEAN DRIVE
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

STEWART, WILLIAM J
STEWART & EVANS PA
3355 OCEAN DRIVE
VERO BEACH, FL 32963 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: 04/15/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LEFFEW, SUZANNE
Address: 4900 13TH LANE
City-St-Zip: VERO BEACH, FL 32966

Title: CD (X) Delete
Name: HERMAN, RICK
Address: 5600 U S HWY 1 N
City-St-Zip: FORT PIERCE, FL 34946

Title: D (X) Delete
Name: DAVIS-HODGKINS, MEGAN
Address: 5600 U S HWY 1 N
City-St-Zip: FORT PIERCE, FL 34946

Title: TD (X) Delete
Name: KING, LARRY P
Address: 14816 HARTFORD RUN DR.
City-St-Zip: ORLANDO, FL 32828

Title: VPD (X) Delete
Name: VAN WYK, PETER
Address: 5600 U S HWY 1 N
City-St-Zip: FORT PIERCE, FL 34946

Title: D (X) Delete
Name: HOFF, FRANK
Address: 33418 OLD ST. JOE ROAD
City-St-Zip: DADE CITY, FL 33525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DAVIS-HODGKINS, MEGAN
Address: 5600 U.S. 1 NORTH
City-St-Zip: FORT PIERCE, FL 34946

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: MEGAN DAVIS-HODGKINS D 04/15/2005
Electronic Signature of Signing Officer or Director — Date