2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 02, 2007 08:00 AM **DOCUMENT # P01000068454 Secretary of State** 1. Entity Name WEKIVA MARINA PROPERTY, INC. Principal Place of Business Mailing Address 1555 BAYWATER COURT 1555 BAYWATER COURT HEATHROW, FL 32746 HEATHROW, FL 32746 No Chg-P CR2E034 (11/05) 02282007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3730900 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DOWD, J. STEVEN DO NOT WRITE 1555 BAYWATER COURT HEATHROW, FL 32746 IN THIS SPACE 8. 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 | I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITI F NAME DOWD, J. STEVEN STREET ADDRESS 1555 BAYWATER COURT CITY-ST-ZIP HEATHROW, FL 32746 U00000653597 TITLE 03/13/07-80027-019 150.60 NAME DOWD, E. MICHAEL STREET ADDRESS 742 BEAR CREEK CIRCLE CITY-ST-ZIP WINTER SPRINGS, FL 32708 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

STREET ADDRESS
CITY+ST-ZIP
TITLE
NAME
STREET ADDRESS

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