

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112717

FILED  
Jan 02, 2008  
Secretary of State

Entity Name: BLUE WATER POWERBOATS, INC

## Current Principal Place of Business:

200 E 13TH ST  
RIVIERA BEACH, FL 33404

## New Principal Place of Business:

1130 GULFSTREAM WAY  
SINGER ISLAND, FL 33404 US

## Current Mailing Address:

PO BOX 111  
LAKE WORTH, FL 33460

## New Mailing Address:

1130 GULFSTREAM WAY  
SINGER ISLAND, FL 33431 US

FEI Number: 30-0297584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MINERVINI, CHUCK  
1116 LAKE TERR. 112-G  
BOYNTON BCH, FL 33426 US

## Name and Address of New Registered Agent:

WALTER H. MESSICK, P.A.  
1900 CORPORATE BLVD.  
SUITE 305 WEST  
BOCA RATON, FL 33431 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: WALTER H. MESSICK

01/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: MINERVINI, CHUCK  
Address: 1116 LAKE TERRACE # 112-G  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T (X) Delete  
Name: PAOLONE, MICHAEL S  
Address: 1 HARBORSIDE DR APT 4407  
City-St-Zip: DELRAY BEACH, FL 33483

Title: V (X) Delete  
Name: WEBER, ROBERT  
Address: 4712 LUCERNE LAKES BLVD, UNIT 102  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition  
Name: POLLIO, MARK  
Address: 1130 GULFSTREAM WAY  
City-St-Zip: SINGER ISLAND, FL 33404 US

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: MARK POLLIO

PTSD

01/02/2008

Electronic Signature of Signing Officer or Director

Date