

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01608

Entity Name: BOAT/U.S., INC.

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

880 SOUTH PICKETT ST.
ALEXANDRIA, VA 22304

New Principal Place of Business:

Current Mailing Address:

880 SOUTH PICKETT ST.
PO BOX 22381
ALEXANDRIA, VA 22304

New Mailing Address:

FEI Number: 54-1259466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLETCHER, VIRGINIA L
3326-5 LAKESHORE BLVD.
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

FLETCHER, VIRGINIA L
6255 LAKE GRAY BLVD.
SUITE 4
JACKSONVILLE, FL 32244 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:

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OAKERSON, WILLIAM,
Address: 9399 CROSS POINTE DR
City-St-Zip: FAIRFAX STATION, VA 22039

Title: S () Delete
Name: MATEY, EVELYN,
Address: 12121 THOROUGHbred RD
City-St-Zip: OAK HILL, VA 20171

Title: T () Delete
Name: CARD, DIANA F
Address: 12212 EDDYSTONE COURT
City-St-Zip: LAKE RIDGE, VA 22192

Title: CD () Delete
Name: SCHWARTZ, RICHARD,
Address: 1401 N. OAK STREET
City-St-Zip: ARLINGTON, VA 22209

Title: VPC () Delete
Name: CARD, DIANA F
Address: 12212 EDDYSTONE CT.
City-St-Zip: WOODBRIDGE, VA 22192

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:

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: WILLIAM OAKERSON

PRES

01/04/2008

Electronic Signature of Signing Officer or Director

Date