

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027178

Entity Name: AMF MARINA SERVICES, INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

4139 SHOAH LANE BLVD  
HERNANDO BEACH, FL 34607

## New Principal Place of Business:

## Current Mailing Address:

4139 SHOAL LINE BOULEVARD  
HERNANDO BEACH, FL 34607

## New Mailing Address:

FEI Number: 27-0006278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMBROSE, JOSEPH  
321 WATERFORD CIRCLE EAST  
TARPON SPRINGS, FL 34688 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVPS ( ) Delete  
Name: AMBROSE, JOSEPH F  
Address: 321 WATERFORD CIR. E  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: T ( ) Delete  
Name: AMBROSE, JOSEPH  
Address: 321 WATERFORD CIR. E  
City-St-Zip: TARPON SPRINGS, FL 34688

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: AMBROSE, JOSEPH F  
Address: 321 WATERFORD CIR. E  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VP (X) Change ( ) Addition  
Name: AMBROSE, LUZDARY  
Address: 321 WATERFORD CIR. E  
City-St-Zip: TARPON SPRINGS, FL 34688

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: LUZDARY AMBROSE

VP

05/01/2008

Electronic Signature of Signing Officer or Director

Date