

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2008 8:00 am**  
**Secretary of State**

01-22-2008 90075 019 \*\*\*150.00

<b>DOCUMENT # P02000072759</b>					
<b>1. Entity Name</b> MORELAND MARINE DEVELOPMENT CORPORATION OF HOLMES BEACH					
<b>Principal Place of Business</b> 701 BAYSHORE BLVD. TAMPA, FL 33606			<b>Mailing Address</b> 701 BAYSHORE BLVD. TAMPA, FL 33606		
<b>2. Principal Place of Business - No P.O. Box #</b> 13625 N. FLORIDA AVE.		<b>3. Mailing Address</b> 13625 N. FLORIDA AVE.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> TAMPA, FL		<b>City &amp; State</b> TAMPA, FL		<b>4. FEI Number</b> 16-1619249	
<b>Zip</b> 33613		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  WARD, KEN 701 BAYSHORE BLVD. TAMPA, FL 33606			<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PD <b>NAME</b> RAIRIGH, RAYMOND L <b>STREET ADDRESS</b> 13625 N. FLORIDA AVE. <b>CITY-ST-ZIP</b> TAMPA, FL 33613	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> WARD, KEN <b>STREET ADDRESS</b> 701 BAYSHORE BLVD. <b>CITY-ST-ZIP</b> TAMPA, FL 33606	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> ROSEMAN, RONALD L <b>STREET ADDRESS</b> P.O. BOX 151285 <b>CITY-ST-ZIP</b> TAMPA, FL 33684	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> QUARTERMAIN, BRIAN <b>STREET ADDRESS</b> 609 N. POINT DR <b>CITY-ST-ZIP</b> HOLMES BEACH, FL 34217	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby 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.</b>					
<b>SIGNATURE:</b> <u>Raymond L. Rairigh, Sr.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1-15-08 <small>Date</small>		813-971-7733 <small>Daytime Phone #</small>