

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000002689

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

**Entity Name:** RESEARCH VESSEL TIBURON, INC.

**Current Principal Place of Business:**

1107 KEY PLAZA  
299  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

1107 KEY PLAZA  
299  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 65-1167458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAYLOR, TIMOTHY F PRES  
1107 KEY PLAZA #299  
#299  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

TAYLOR, TIMOTHY F PRES  
1107 KEY PLAZA #299  
#299  
KEY WEST, FL 33040 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: TIMOTHY TAYLOR

01/16/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: AYERS, PATRICIA C  
Address: 5 KESTRAL WAY  
City-St-Zip: STOCK ISLAND, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TREA (X) Change ( ) Addition  
Name: TIMOTHY, TAYLOR F  
Address: 1107 KEY PLAZA #299  
City-St-Zip: KEY WEST, FL 33040

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: TIMOTHY TAYLOR

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date