2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053879

Entity Name: RAIDER MARINE SERVICE, INC.

FILED Feb 04, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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523 ANCLOTE ROAD TARPON, FL 34689

Current Mailing Address: New Mailing Address:

523 ANCLOTE ROAD TARPON, FL 34689

FEI Number: 16-1666368 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SLAHETKA, JANICE
523 ANCLOTE ROAD
TARPON, FL 34689 US
SLAHETKA, DANIEL
523 ANCLOTE ROAD
TARPON, FL 34689 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: DANIEL SLAHETKA 02/04/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: SLAHETKA, DONALD Name: SLAHETKA, DANIEL

Address: 4229 RUDDER WAY Address: 3621 SPRING VALLEY DR.
City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VSD () Delete Title: VSD (X) Change () Addition Name: SLAHETKA, JANICE Name: SLAHETKA, DANIEL

Address: 4229 RUDDER WAY Address: 3621 SPRING VALLEY DR.
City-St-Zip: NEW PORT RICHEY, FL 34652 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: TD () Delete Title: TD (X) Change () Addition

Name:SLAHETKA, DANNYName:SLAHETKA, DANIELAddress:13116 BLUE SQUIRREL COURTAddress:3621 SPRING VALLEY DR.City-St-Zip:HUDSON, FL 34669City-St-Zip:NEW PORT RICHEY, FL 34655

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: DANIEL SLAHETKA PD 02/04/2009