2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000122418

FRAM, SANDRA L.,

220 S.W. 32ND STREET

FORT LAUDERDALE, FL 33315

Name:

Address: City-St-Zip:

Entity Name: LEWIS MARINE SUPPLY OF MAINE, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 220 SW 32 ST FT LAUDERDALE, FL 33315 **Current Mailing Address: New Mailing Address:** 220 SW 32 ST FT LAUDERDALE, FL 33315 FEI Number: 74-3108010 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: STEPHENS, JOHN E 220 SW 32 STREET FORT LAUDERDALE, FL 33315 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition LEWIS, STEPHEN R., Name: Name: 220 S.W. 32 STREET Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: Title: Title: () Delete () Change () Addition Name: COLEMAN, CAROLYN E., Name: 220 S.W. 32ND STREET Address: Address: FORT LAUDERDALE, FL 33315 City-St-Zip: City-St-Zip: () Delete Title: VPD Title: () Change () Addition STEPHENS, JOHN E., Name: Name: 220 S.W. 32ND STREET Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: Title: () Delete Title: () Change () Addition LEWIS, JODY L., Name: Name: Address: 220 S.W. 32ND STREET Address: City-St-Zip: FORT LAUDERDALE, FL 33315 City-St-Zip: Title: Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN E STEPHENS VP 04/30/2008