

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000006870

Entity Name: HURRICANE PASS MARINE SERVICES INC.

FILED  
Jan 15, 2007  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 1297  
PANAMA CITY, FL 324021297 US

**New Principal Place of Business:**

8134 CLUSTER RD  
PANAMA CITY, FL 32404 US

**Current Mailing Address:**

P.O. BOX 1297  
PANAMA CITY, FL 324021297 US

**New Mailing Address:**

FEI Number: 20-0625473      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

OGDEN, DARRYL  
311 MASSALINA DR  
PANAMA CITY, FL 32401 US

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

OGDEN, DARRYL  
8134 CLUSTER RD  
PANAMA CITY, FL 32404 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: DARRYL OGDEN

01/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: OGDEN, DARRYL  
Address: P.O. BOX 1297  
City-St-Zip: PANAMA CITY, FL 324021297

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DARRYL OGDEN

D

01/15/2007

Electronic Signature of Signing Officer or Director

Date