## 2008 FOR PROFIT CORPORATION

## **FILED** 2008 08:00 AN Ech 15 ate

| ANNUAL REPORT   |   |   |  | rep 15, 2008 08:0  |  |  |  |
|---|---|---|--|--|--|--|--|
| DOCUMENT # P04000166615  1. Entity Name REEF DOG INC  |   |   |  |  |  | Secreta  | ry of St   |
| Principal Place of Business  2820 BEACH BOULEVARD GULFPORT, FL 33707  Mailing Address  2820 BEACH BOULEVARD GULFPORT, FL 33707  |   |   | ]<br>  | I PAH BYOU BOUN I BYA BY   | 118  | 11 #1881 BIII BBY #1 #888  |  |
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| 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.   | O NOT WRITE   | The company through the give the second | BUTTON BEET  | 4. FEI Numbe<br>20-1990<br>5. Certificate of   |  |  | Applied For Not Applicable  75 Additional  |
| 3   | for the first property of the   |   | , 京原州外北原州, 高电  |  |  | Fee I  | Required   |
|   | 6. Name and Address of Current Re  7. MARY T CH BOULEVARD RT, FL 33707        | gistered Agent                          |  | DO   | NOT W  | /RITE  |  |
| 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 Fictive obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and tate if applicable  (NOTE: Registered Agent signature required when reinstating)   |   |   |  |  |  | DATE   | ar with, and accept  |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2008 Fee will be \$550.00   |   |   | Add  | .00 May Be<br>led to Fees  | 02/26/00   | )0828816<br>3-80014-01   |  |
| 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  | OFFICERS AND DI PSTD O'MALLEY, MARY T 2820 BEACH BOULEVARD GULFPORT, FL 33707 | RECTORS                                 | ne comment of earl<br>our comment of earl<br>our comment of earl   | ar pool of the star of the sta   | and the area of the  | gan Dr. 1880 og gjor til   |  |
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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 carb; that I am an officer or director of the corporation or the receiver or stustee empowered be execute this report as Tequired 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 the information of the corporation or the receiver or stustee empowered be execute this report as Tequired 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 the information and the corporation or the receiver or stustee empowered.

SIGNATURE:

> R PRINTED NAME OF SKINING OFFICER OR DIRECTOR SIGNATURE AND TYPED

Daytime Phone # Date