2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123479

Entity Name: TIDEWATER ENTERPRISES OF FT. MYERS, INC.

FILED Mar 22, 2007 Secretary of State

	Principal Place of Business:	New Principal Place of Business:	
	EWATER ISLAND CIRCLE S, FL 33908		
Current N	Mailing Address:	New Mailing Address	s:
	EWATER ISLAND CIRCLE S, FL 33908		
FEI Numbe	r: 51-055571 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address o	f New Registered Agent:
6071 TIDE FT MYER The above	LS, TRACEY J EWATER ISLAND CIRCLE S, FL 33908 US e named entity submits this statement for the te of Florida.	purpose of changing its registere	d office or registered agent, or both,
SIGNATU	JRE:		
	Electronic Signature of Registered A	gent	Date
Election Ca	ampaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS
Name: Address:	PD () Delete MERRALLS, TRACEY J 6071 TIDEWATER ISLAND CIRCLE FT MYERS, FL 33908	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS () Change () Addition
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	PD () Delete MERRALLS, TRACEY J 6071 TIDEWATER ISLAND CIRCLE FT MYERS, FL 33908 VPD () Delete SCHNEIDER, CHRISTOPHER D 5100 SOUTH CLEVELAND AVE, SUITE 318-364	Title: Name: Address:	
Name: Address: City-St-Zip: Title: Name: Address:	PD () Delete MERRALLS, TRACEY J 6071 TIDEWATER ISLAND CIRCLE FT MYERS, FL 33908 VPD () Delete SCHNEIDER, CHRISTOPHER D 5100 SOUTH CLEVELAND AVE, SUITE 318-364 FT MYERS, FL 33907 SD () Delete SCHNEIDER, MICHAEL E 5100 SOUTH CLEVELAND AVE, SUITE 318-364	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: TRACEY MERRALLS PD 03/22/2007