

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000139075

FILED
Apr 16, 2008
Secretary of State

Entity Name: FISH BOWL MATERIALS, INC.

Current Principal Place of Business:

6100 SE 78TH STREET
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

P O BOX 1716
BELLEVIEW, FL 34421

New Mailing Address:

FEI Number: 20-3604420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER, DAVID W
810 S.W. 80TH STREET
OCALA, FL 34476 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: FISHER, DAVID W
Address: 810 S.W. 80TH STREET
City-St-Zip: OCALA, FL 34476

Title: VP () Delete
Name: BOWLIN, MYRON K
Address: POST OFFICE BOX 54
City-St-Zip: CANDLER, FL 32111

Title: S () Delete
Name: BOWLIN, MYRON K
Address: POST OFFICE BOX 54
City-St-Zip: CANDLER, FL 32111

Title: T () Delete
Name: BOWLIN, MYRON K
Address: POST OFFICE BOX 54
City-St-Zip: CANDLER, FL 32111

Title: D () Delete
Name: LAMBERT, DERRY
Address: 9920 S.E. 67TH AVENUE ROAD
City-St-Zip: BELLEVIEW, FL 34420

Title: D () Delete
Name: MOORE, WILLIAM H
Address: 3240 S.W. 34TH STREET, APT. 1018
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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Name:
Address:
City-St-Zip:

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

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: WILLIAM MOORE

D

04/16/2008

Electronic Signature of Signing Officer or Director

Date