

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086977

FILED
Jan 30, 2007
Secretary of State

Entity Name: EXPLORER'S BOUNTY, INC.

Current Principal Place of Business:

2000 WARRINGTON WAY
SUITE 163
LOUISVILLE, KY 40222

New Principal Place of Business:

Current Mailing Address:

2000 WARRINGTON WAY
SUITE 163
LOUISVILLE, KY 40222

New Mailing Address:

FEI Number: 20-5691578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALPEN, DAVID M
249 ROYAL PALM WAY
PLAZA CENTER - SUITE 501
PALM BEACH, FL 33480 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: OWRE, CAROLINE
Address: 8390 NW 53RD STREET, SUITE 312
City-St-Zip: MIAMI, FL 33166

Title: VP () Change (X) Addition
Name: GHEE, JOHN
Address: 8390 NW 53RD STREET, SUITE 312
City-St-Zip: MIAMI, FL 33166

Title: TREA () Change (X) Addition
Name: MURR, ANTHONY
Address: 2000 WARRINGTON WAY, SUITE 163
City-St-Zip: LOUISVILLE, KY 40222

Title: SEC () Change (X) Addition
Name: MURR, ANTHONY
Address: 2000 WARRINGTON WAY, SUITE 163
City-St-Zip: LOUISVILLE, KY 40222

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: ANTHONY MURR

TREA

01/30/2007

Electronic Signature of Signing Officer or Director

Date