2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109656

Entity Name: FIRST COAST HURRICANE PROTECTION INC.

FILED Apr 10, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

247 B SAN MARCO AVE 128 A SAN MARCO AVE ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

247 B SAN MARCO AVE ST. AUGUSTINE, FL 32084 128 A SAN MARCO AVE ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32084

FEI Number: 77-0664702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WIESER, WALTER
247 B SAN MARCO AVE
ST. AUGUSTINE, FL 32084 US
ST. AUGUSTINE, FL 32084 US
ST. AUGUSTINE, FL 32084 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: 04/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition
Name: WIESER, WALTER Name: WIESER, WALTER
Address: 247 B SAN MARCO AVE Address: 128 A SAN MARCO AVE

 247 B SAN MARCO AVE
 Address:
 128 A SAN MARCO AVE

 ST. AUGUSTINE, FL 32084
 City-St-Zip:
 ST. AUGUSTINE, FL 32084

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WIESER, GIÀNCARLO
 Name:
 WIESER, GIÀNCARLO

 Address:
 247 B SAN MARCO AVE
 Address:
 128 A SAN MARCO AVE

 City-St-Zip:
 ST. AUGUSTINE, FL 32084
 City-St-Zip:
 ST. AUGUSTINE, FL 32084

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: WALTER WIESER D 04/10/2009