

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000116676

FILED
Apr 07, 2008
Secretary of State

Entity Name: SPANISH MAIN TREASURE COMPANY, INC.

Current Principal Place of Business:

613 CUDA LANE
KEY LARGO, FL 33037

New Principal Place of Business:

158 COCONUT ROW
TAVERNIER, FL 33070

Current Mailing Address:

613 CUDA LANE
KEY LARGO, FL 33037

New Mailing Address:

158 COCONUT ROW
TAVERNIER, FL 33070

FEI Number: 20-5527328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACE, BRENDA A
613 CUDA LANE
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

MACE, BRENDA A
158 COCONUT ROW
TAVERNIER, FL 33070 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: BRENDA MACE

04/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FISMER, CARL
Address: 179 AZALEA STREET
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: MACE, GARY M
Address: 613 CUDA LANE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: MACE, BRENDA A
Address: 613 CUDA LANE
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MACE, GARY M
Address: 158 COCONUT ROW
City-St-Zip: TAVERNIER, FL 33070

Title: D (X) Change () Addition
Name: MACE, BRENDA A
Address: 158 COCONUT ROW
City-St-Zip: TAVENIER, FL 33070

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: GARY MACE

D

04/07/2008

Electronic Signature of Signing Officer or Director

Date