2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000130190

Address:

City-St-Zip:

105 CLUBHOUSE LANE #388

NAPLES, FL 34105 US

Entity Name: STORM SURF COMPANY INC.

FILED Jul 31, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
105 CLUB NAPLES, I	HOUSE LANE FL 34105 l	: #388 JS			
Current Mailing Address:			New Mailing Address:		
28380 OLD 41 ROAD			1 NORTH FOREST BEACH		
5 BONTIA SPRINGS, FL 34135 US			UNIT 107 HILTON HEAD, SC 29928 US		
	: 26-1591019	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
320 S. FLA #347 PEMBROA	AMINGO ROAI KE PINES, FL	33027 US	purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.	•			
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
		03(2)(b), F.S., the corporation did no	ot receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	KRAUSE, AAR	SE LANE #388	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DRIEBELBIS,	SE LANE #388	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DREIBELBIS,	SE LANE #388	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DREIBELBIS,	SE LANE #388	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DIR (KRAUSE, AAR) Delete ON M	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: AARON KRAUSE PRES 07/31/2009