

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000040873

FILED
Apr 08, 2009
Secretary of State

Entity Name: ISLAND WATERCRAFT RENTALS, INC.

Current Principal Place of Business:

1872 EAST MERRITT ISLAND 520 CSWY
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

601 N MIRAMARA UNIT 106
INDIALANTIC, FL 32903

New Mailing Address:

601 N MIRAMAR UNIT 106
INDIALANTIC, FL 32903

FEI Number: 32-0260037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORSCHER, MARK E
1872 EAST MERRITT ISLAND 520 CSWY
MERRITT ISLAND, FL 32952 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: D () Delete
Name: TROWELL, WESLEY L
Address: 426 KREFELD ROAD NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: HORSCHER, MARK E
Address: 601 N MIRAMAR UNIT 106
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WESLEY L. TROWELL

D

04/08/2009

Electronic Signature of Signing Officer or Director

Date