

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000071510

FILED
Jan 14, 2012
Secretary of State

Entity Name: ADVENTURE AQUACULTURE INC

Current Principal Place of Business:

355-G TORTOISE VIEW DRIVE
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

355-G TORTOISE VIEW DRIVE
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 45-2966204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHURTLEFF, ROGER W JR
355-G TORTOISE VIEW DRIVE
SATELLITE BEACH, FL 32937 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

OFFICERS AND DIRECTORS:

Title: P
Name: SILVERMAN, DAVID K
Address: 1300 PINETREE DRIVE SUITE 5
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: VP
Name: RIVERS, LEWIS
Address: 355-A TORTOISE VIEW DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 VP

Title: VP
Name: MERKER, JAMES
Address: 355-A TORTOISE VIEW DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: SEC
Name: SHURTLEFF, ROGER W JR
Address: 355-G TORTOISE VIEW DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937 FL

Title: TREA
Name: WASSER, RAYMOND E III
Address: 180 MAPLE DTRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby 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 all other like empowered.

SIGNATURE: ROGER W. SHURTLEFF, JR.

SEC.

01/14/2012

Electronic Signature of Signing Officer or Director

Date