

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Nov 24, 2009  
Secretary of State**

DOCUMENT# P93000026403

Entity Name: 84 BOAT WORKS, INC.

**Current Principal Place of Business:**

990 W ST RD 84  
FORT LAUDERDALE, FL 33315 US

**New Principal Place of Business:**

**Current Mailing Address:**

990 W ST RD 84  
FORT LAUDERDALE, FL 33315 US

**New Mailing Address:**

FEI Number: 65-0407892      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOHNE, EDWARD J. II  
990 W ST RD 84  
FT LAUDERDALE, FL 33315 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: PST ( ) Delete  
Name: BOHNE, EDWARD J II  
Address: 990 W ST RD 84  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BOHNE, EDWARD J II  
Address: 990 W ST RD 84  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T ( ) Change (X) Addition  
Name: MCCLURE, LINDA J  
Address: 990 W ST RD 84  
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: S ( ) Change (X) Addition  
Name: BOHNE, BRIAN C  
Address: 990 W ST RD 84  
City-St-Zip: FORT LAUDERDALE, FL 33304 US

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: EDWARD J. BOHNE, II

PD

11/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date