2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000055483

Entity Name: ALLEN BILLS MARINE, INC.

FILED May 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

420 VAN BUREN ST. FT. MYERS, FL 33916 US

Current Mailing Address: New Mailing Address:

420 VAN BUREN STREET 420 VAN BUREN ST. FORT MYERS, FL 33916 US

FEI Number: 65-0425399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BILLS, ALLEN D BILLS, ALLEN D PD
420 VAN BUREN STREET
FORT MYERS, FL 33916 US
BILLS, ALLEN D PD
420 VAN BUREN STREET
FORT MYERS, FL 33916 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: ALLEN D. BILLS 05/18/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ()Delete Title: ()Change ()Addition

 Name:
 BILLS, ALLEN D PD
 Name:

 Address:
 420 VAN BUREN STREET
 Address:

 City-St-Zip:
 FT MYERS, FL 33916 US
 City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition Name: BILLS, BRANDY L STD Name: BILLS, BRANDY L STD

Name:BILLS, BRANDY L STDName:BILLS, BRANDY L STDAddress:3853 E RIVER DRAddress:420 VAN BUREN STREETCity-St-Zip:FT MYERS, FL 33916City-St-Zip:FT MYERS, FL 33916

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BILLS, DAVID Á VP
 Name:
 BILLS, HEATHER L VP

 Address:
 1620 NW. 10TH STREET
 Address:
 4012 E. RIVER DR.

 City-St-Zip:
 CAPE CORAL, FL 33993
 City-St-Zip:
 FORT MYERS, FL 33916

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: ALLEN D. BILLS PD 05/18/2009