2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000012739

BARNES, MARY K

174 LONE PINE DRIVE

MASONTOWN, WV 26542

Name:

Address:

City-St-Zip:

Entity Name: BARNES BROTHER'S DOLPHIN HOUSE, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place	of Business:	
768 GRAN KAYCAYNE WAY APOLLO BEACH, FL 33572			768 GRAN KAYMAN WAY APOLLO BEACH, FL 33572	
Current Mailing Address:		New Mailing Address:		
	PINE DRIVE DWN, WV 26542			
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
6418 US 4	SR ALBERT R 1 NORTH, STE 264 BEACH, FL 33572 US			
	named entity submits this statement for the of Florida.	ne purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:			
Electronic Signature of Registered Agent		Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	ST () Delete BARNES, MARY K 6022 US HWY. 41. N. BOX 164 APOLLO BEACH, FL 33572	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	P () Delete	Title:		
Name: Address:	BARNES, SR ALBERT R 6022 US HWY. 41 N. BOX 164 APOLLO BEACH, FL 33572	Name: Address: City-St-Zip:	() Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	BARNES, SR ALBERT R 6022 US HWY. 41 N. BOX 164	Name: Address:	() Change () Addition () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARY KAY BARNES ST 04/27/2007