

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000066536

FILED
Apr 29, 2009
Secretary of State

Entity Name: D & R MARINE, OF CRYSTAL RIVER, INC.

Current Principal Place of Business:

5611 WEST HUNTERS RIDGE CIRCLE
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

5611 WEST HUNTERS RIDGE CIRCLE
LECANTO, FL 34461 US

New Mailing Address:

FEI Number: 59-3271980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNETT, LESLIE J
601 BAYSHORE BLVD., STE. 700
TAMPA, FL 33606 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: VD () Delete
Name: LOUGHRIDGE, PAUL D
Address: 10449 N. DAWNFLOWER POINT
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: PD () Delete
Name: LOUGHRIDGE, GLENN
Address: 5611 WEST HUNTERS RIDGE CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: S () Delete
Name: LOUGHRIDGE, SHANNON
Address: 5611 WEST HUNTERS RIDGE CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: T () Delete
Name: LOUGHRIDGE, CRISSY
Address: 1840 STETSON DR.
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GLENN LOUGHRIDGE

PD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date