

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000082305

Entity Name: SCHOONER, INC.

FILED
Mar 06, 2008
Secretary of State

Current Principal Place of Business:

9010 STRADA STELL CT
SUITE 205
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

% JOY A. FELDMAN, ESQ., THE PARK ASSOC.
300 GLEED AVE.
E. AURORA, NY 140522980

New Mailing Address:

% JOY A. FELDMAN, ESQ., THE PARK ASSOC.
280 MAIN STREET
E. AURORA, NY 14052

FEI Number: 16-1470140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: PD () Delete
Name: CHUR, BARBARA B
Address: 166 DAVIS RD
City-St-Zip: E. AURORA, NY 14652

Title: VP () Delete
Name: FELDMAN, JOY A.
Address: 167 RUSKIN ROAD
City-St-Zip: AMHERST, NY 14226

Title: ST () Delete
Name: BRYLINSKI, PAULETT K
Address: 416 SOUTH STREET
City-St-Zip: EAST AURORA, NY 14052

Title: VP () Delete
Name: SMITH, JOHN
Address: 18 KENTON PLACE
City-St-Zip: HAMBURG, NY 14075

Title: T () Delete
Name: SMITH, JOHN E
Address: 18 KENTON PL
City-St-Zip: HAMBURG, NY 14075

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: CONROY, MELISSA A
Address: 280 MAIN STREET
City-St-Zip: EAST AURORA, NY 14052

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: BARBARA B. CHUR

PRES

03/06/2008

Electronic Signature of Signing Officer or Director

Date